

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 Brian Higgins for Congress

ADDRESS (number and street) P.O. Box 28 Buffalo NY 14220 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00401034 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT NY 26

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER) (b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 10 / 01 / 2013 through M M / D D / Y Y Y Y 12 / 31 / 2013

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 Mr. Gary Kanaley

Signature of Treasurer Mr. Gary Kanaley [Electronically Filed] Date M M / D D / Y Y Y Y 01 / 31 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Brian Higgins 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))....	259755.00	524967.50
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	259755.00	524967.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	59979.41	295009.46
(b) Total Offsets to Operating Expenditures (from Line 14).....	649.29	1490.81
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	59330.12	293518.65
8. Cash on Hand at Close of Reporting Period (from Line 27).....	642194.86	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	540.12	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Brian Higgins 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).....	210475.00	372237.50
(ii) Unitemized.....	3780.00	22530.00
(iii) TOTAL of contributions from individuals ▶	214255.00	394767.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	45500.00	130200.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	259755.00	524967.50
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	649.29	1490.81
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	46.79	243.47
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	260451.08	526701.78

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	59979.41	295009.46
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	12969.00	59026.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	72948.41	354035.46

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	454692.19
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	260451.08
25. SUBTOTAL (add Line 23 and Line 24).....	715143.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	72948.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	642194.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 6430 Scherff Rd

City Orchard Park State NY Zip Code 14127-3743

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

Name of Employer Gypsum Systems Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : C9897003**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 152 Howell Street

City Canandaigua State NY Zip Code 14424

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

Name of Employer best effort Occupation best effort

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C9897006**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 48 Plantation Ct.

City East Amherst State NY Zip Code 14051

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 16 / 2013

**Transaction ID : C9893977**

Amount of Each Receipt this Period  
 1000.00

**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 6 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Stuart H. Angert</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 179 Greenaway Rd.		<b>Transaction ID : C9897007</b>
City Amherst	State NY	Zip Code 14226
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer best effort	Occupation best effort	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>Charles Balbach</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address PO Box 423		<b>Transaction ID : C9897008</b>
City Orchard Park	State NY	Zip Code 14127-0423
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Nancy L Pressly & Assoc	Occupation self-investor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>Richard J. Barnes</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 73 Wildwood Lane		<b>Transaction ID : C9897009</b>
City Orchard Park	State NY	Zip Code 14127
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Cellino & Barnes	Occupation attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> 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 7 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew Beck</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013	
Mailing Address 364 Park Place		<b>Transaction ID : C9897010</b>	
City Grand Island	State NY	Zip Code 14072	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Duke Holzman Photiadis & Gresens LLP	Occupation Partner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Randall K. Best</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 14 / 2013	
Mailing Address 103 Sunset Blvd.		<b>Transaction ID : C9897011</b>	
City Angola	State NY	Zip Code 14006	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Gernatt Asphalt Products, Inc.	Occupation VP, Business Development		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) <b>C. Scott Bieler</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013	
Mailing Address 360 West Falls Rd.		<b>Transaction ID : C9897012</b>	
City West Falls	State NY	Zip Code 14170	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer West Herr Auto Group	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> 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 8 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Dorothy Blake</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2013
Mailing Address 4129 Chatham Drive		<b>Transaction ID : C9893988</b>
City Hamburg	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer none	Occupation retired	Election Cycle-to-Date 250.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Frank M. Bogulski</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 02 / 2013
Mailing Address 88 W. Utica Street		<b>Transaction ID : C9897014</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Attorney	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>John G. Brenon</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 10 / 2013
Mailing Address 73 Meadow Spring Ct		<b>Transaction ID : C9897016</b>
City East Amherst	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation attorney	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2050.00
<b>TOTAL</b> 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 9 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gary Brost</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 925 Delaware Avenue, Unit 6B		<b>Transaction ID : C9897017</b>
City Buffalo	State NY	
Zip Code 14209		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Strategic Investments	Occupation Partner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Gary Brost</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 925 Delaware Avenue, Unit 6B		<b>Transaction ID : C9897018</b>
City Buffalo	State NY	
Zip Code 14209		Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Strategic Investments	Occupation Partner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Willow R. Brost</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 200 Delaware Avenue, #1509		<b>Transaction ID : C9897019</b>
City Buffalo	State NY	
Zip Code 14202		Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Civic Volunteer	Occupation Civic Volunteer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> 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 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 6210 Old Lake Shore Road

City State Zip Code  
Lake View NY 14085

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

Name of Employer best effort Occupation best effort

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9897020**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 104 Sunburst Circle

City State Zip Code  
East Amherst NY 14051

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

Name of Employer Phillips Lytle, LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9897021**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 225 Halston Pkwy.

City State Zip Code  
East Amherst NY 14051

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

Name of Employer Town of Amherst Occupation Board Member

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9897022**

Amount of Each Receipt this Period  
 500.00

**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 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 10 Sunshine Dr.

City Amherst State NY Zip Code 14228

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

Name of Employer Buffington Ansel CPAs Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9897023**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 14 Rock Dove Ln.

City Orchard Park State NY Zip Code 14127

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

Name of Employer Roswell Park Cancer Institute Occupation Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : C9897024**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 351 Craig Burn Drive

City East Aurora State NY Zip Code 14052

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

Name of Employer Roswell Park Cancer Institute Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : C9897030**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 12 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert M. Chur**

Mailing Address 7 Limestone Dr.

City State Zip Code  
Williamsville NY 14221

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

Name of Employer Occupation  
CCNY Information Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 16 / 2013

**Transaction ID : C9894001**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 670 Knabb Rd

City State Zip Code  
Elma NY 14059-9434

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : C9897032**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 350 Essjay Rd

City State Zip Code  
Buffalo NY 14221-8242

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

Name of Employer Occupation  
Ciminelli Properties, LLC CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 23 / 2013

**Transaction ID : C9897033**

Amount of Each Receipt this Period  
1000.00

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

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

2100.00

**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 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address **77 Gates Circle**

City **Buffalo** State **NY** Zip Code **14209**

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

Name of Employer **LPCiminelli, Inc.** Occupation **Chairman & CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 05 / 2013**

**Transaction ID : C9897034**

Amount of Each Receipt this Period  
**2000.00**

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

Mailing Address **4137 Susan Dr.**

City **Williamsville** State **NY** Zip Code **14221**

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

Name of Employer **Innovative Realty Services, Inc.** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 16 / 2013**

**Transaction ID : C9897036**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **173 Woodbridge Avenue**

City **Buffalo** State **NY** Zip Code **14214**

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

Name of Employer **Watson Bennett Colligan Johnson & Sche** Occupation **attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 16 / 2013**

**Transaction ID : C9897039**

Amount of Each Receipt this Period  
**1000.00**

**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 14 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anthony J. Colucci III</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 10 / 2013
Mailing Address 2000 Liberty Building 424 Main Street		<b>Transaction ID : C9897040</b>
City Buffalo	State NY	
Zip Code 14202		Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5100.00
Name of Employer Colucci & Gallagher P.C.	Occupation partner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Leonard A. Coppola</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013
Mailing Address 35 Burbank Terr		<b>Transaction ID : C9901974</b>
City Buffalo	State NY	
Zip Code 14214		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 222.50
Name of Employer retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. James W. Cornell</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2013
Mailing Address 5266 Seneca Street		<b>Transaction ID : C9897041</b>
City West Seneca	State NY	
Zip Code 14224		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4500.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2625.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. James W. Cornell</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013	
Mailing Address 5266 Seneca Street		<b>Transaction ID : C9897042</b>	
City West Seneca	State NY	Zip Code 14224	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1900.00	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4500.00		

Full Name (Last, First, Middle Initial) <b>B. Darci Cramer-Benjamin</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013	
Mailing Address 25 Sandhurst Ln.		<b>Transaction ID : C9897043</b>	
City Williamsville	State NY	Zip Code 14221	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Kaleida Health	Occupation Marriage and Family Therapist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Joseph P. Crangle Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013	
Mailing Address 102 Tillinghast Pl		<b>Transaction ID : C9897044</b>	
City Buffalo	State NY	Zip Code 14216-3420	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3900.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 5019 Rockhaven Dr.

City Clarence	State NY	Zip Code 14031
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FEC ID number of contributing federal political committee. **C**

Name of Employer M&T Bank	Occupation President
------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : C9897045**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 97 Viscount Dr.

City Williamsville	State NY	Zip Code 14221
-----------------------	-------------	-------------------

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

Name of Employer Buffalo Engineering, P.C.	Occupation Partner
---	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9897046**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 69 Kingsgate Road

City Snyder	State NY	Zip Code 14226
----------------	-------------	-------------------

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

Name of Employer Roswell Park Cancer Institute	Occupation Director of Government Affairs
---	--

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 18 / 2013

**Transaction ID : C9901969**

Amount of Each Receipt this Period  
1000.00

**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 17 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Judith M. Dean</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013	
Mailing Address 95 Windsor Ave		<b>Transaction ID : C9897047</b>	
City Buffalo	State NY	Zip Code 14209-1018	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) <b>B. Judith M. Dean</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013	
Mailing Address 95 Windsor Ave		<b>Transaction ID : C9897048</b>	
City Buffalo	State NY	Zip Code 14209-1018	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) <b>C. Alan Dewart</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2013	
Mailing Address 3799 Baker Rd.		<b>Transaction ID : C9897049</b>	
City Orchard Park	State NY	Zip Code 14127	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Seneca Development & Management Corp	Occupation Real Estate Developer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> 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 18 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 160 Greenaway Rd

City Buffalo State NY Zip Code 14226-4166

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

Name of Employer Dobmeier Janitor Supply, Inc. Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : C9897050**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2850 Amsdell Rd  
Apt 13

City Hamburg State NY Zip Code 14075-7800

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

Name of Employer Fairway Flooring Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9897051**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 8991 Iroquois St

City Angola State NY Zip Code 14006

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 18 / 2013

**Transaction ID : C9894022**

Amount of Each Receipt this Period  
 50.00

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

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

2050.00

**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 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 8991 Iroquois St

City: Angola State: NY Zip Code: 14006

FEC ID number of contributing federal political committee: C

Name of Employer Information Requested: Occupation Information Requested:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1050.00

Date of Receipt: 12 / 09 / 2013

**Transaction ID : C9897052**

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 171 Daven Dr

City: Getzville State: NY Zip Code: 14068-1419

FEC ID number of contributing federal political committee: C

Name of Employer Information Requested: Occupation Information Requested:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 12 / 16 / 2013

**Transaction ID : C9897053**

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 43 Nottingham Ter

City: Buffalo State: NY Zip Code: 14216-3619

FEC ID number of contributing federal political committee: C

Name of Employer Information Requested: Kaleida Health Occupation Information Requested: Chief of Service for OB/GYN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 12 / 02 / 2013

**Transaction ID : C9897054**

Amount of Each Receipt this Period: 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Angelo M. Fatta**

Mailing Address 155 Nottingham Terr.

City Buffalo State NY Zip Code 14216

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

Name of Employer Bufflink Inc. Occupation Chair

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : C9897055**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1439 N Creek Rd

City Lake View State NY Zip Code 14085-9516

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

Name of Employer best effort Occupation best effort

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898230**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1439 North Creek Rd.

City Lake View State NY Zip Code 14085

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

Name of Employer Accenture Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898191**

Amount of Each Receipt this Period  
1000.00

**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 21 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Timothy Flynn</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 81 Candy Ln		<b>Transaction ID : C9894028</b>
City Orchard Park	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-employed	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00	

Full Name (Last, First, Middle Initial) <b>Catherine Foley</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 75 Meadow Rd		<b>Transaction ID : C9898233</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Paul Beltz	Occupation attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

Full Name (Last, First, Middle Initial) <b>Catherine Foley</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 75 Meadow Rd		<b>Transaction ID : C9898234</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Paul Beltz	Occupation attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3100.00
<b>TOTAL</b> 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 22 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address P.O. Box 154

City Lewiston State NY Zip Code 14092

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

Name of Employer Mount St. Mary's Hospital Occupation Senior Director of Operations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 10 / 2013

**Transaction ID : C9898239**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 5035 Goodrich Rd.

City Clarence State NY Zip Code 14031

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

Name of Employer U&S Services, Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898244**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 4053 Maple Rd

City Amherst State NY Zip Code 14226

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

Name of Employer BENCHMARK GROUP Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 16 / 2013

**Transaction ID : C9894057**

Amount of Each Receipt this Period  
 250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dan Gernatt Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 13870 Taylor Hollow Rd.		<b>Transaction ID : C9898245</b>
City Collins	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Gernatt Asphalt Products, Inc.	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Elaine L. Giallanza</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 2740 Bowen Rd.		<b>Transaction ID : C9898248</b>
City Elma	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer best effort	Occupation best effort	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Harbinder S. Gill</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2013
Mailing Address 17 Glen Eagle Court		<b>Transaction ID : C9894050</b>
City Williamsville	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Hatch Acres Corporation	Occupation Engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> 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 24 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Harbinder S. Gill**

Mailing Address 17 Glen Eagle Court

City State Zip Code  
Williamsville NY 14221

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

Name of Employer Occupation  
Hatch Acres Corporation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9898250**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 55 Meadow Rd

City State Zip Code  
Buffalo NY 14216-3613

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 02 / 2013

**Transaction ID : C9898252**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 925 Delaware Ave.

City State Zip Code  
Buffalo NY 14209

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

Name of Employer Occupation  
Information Requested Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 05 / 2013

**Transaction ID : C9898261**

Amount of Each Receipt this Period  
2000.00

**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 25 OF 115		
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard F. Gioia**

Mailing Address 34 Berryman Dr.

City Buffalo State NY Zip Code 14226

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

Name of Employer Damon Morey LLP Occupation Counsel

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9898263**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 151 Buffalo Avenue, Suite 204

City Niagara Falls State NY Zip Code 14303

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

Name of Employer Maid of the Mist Corporation Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 05 / 2013

**Transaction ID : C9898264**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 15 Crimson Way

City Webster State NY Zip Code 14580

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

Name of Employer Landsman Development Corporation Occupation President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 01 / 2013

**Transaction ID : C9894051**

Amount of Each Receipt this Period  
2500.00

**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 26 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 398 Jersey St

City State Zip Code  
Buffalo NY 14213-2658

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

Name of Employer Occupation  
Self-employed Restaurateur

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 03 / 2013

**Transaction ID : C9898265**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 108 Fordham Drive

City State Zip Code  
Buffalo NY 14216

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

Name of Employer Occupation  
Gross, Shuman, Brizdle & Gilfillan, PC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 16 / 2013

**Transaction ID : C9894056**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 106 Ranch Trail West

City State Zip Code  
Williamsville NY 14221

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

Name of Employer Occupation  
best effort best effort

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 20 / 2013

**Transaction ID : C9898281**

Amount of Each Receipt this Period  
2600.00

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

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

3800.00

**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 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Richard A. Greenspan</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 106 Ranch Trail West		<b>Transaction ID : C9898282</b>
City Williamsville	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer best effort	Occupation best effort	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>Allen Grum</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 96 BIDWELL PARKWAY		<b>Transaction ID : C9901970</b>
City BUFFALO	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Rand Capital	Occupation President & CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Neera Gulati</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 350 Alberta Dr.		<b>Transaction ID : C9898285</b>
City Amherst	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Doctor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4400.00
<b>TOTAL</b> 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 28 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Wesley L Hicks**

Mailing Address 9714 Erie Rd

City: Angola State: NY Zip Code: 14006

FEC ID number of contributing federal political committee: C

Name of Employer self Occupation: physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 12 / 10 / 2013

**Transaction ID : C9898295**

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Paul F. Hogan Jr.**

Mailing Address 162 Colgate Ave.

City: Buffalo State: NY Zip Code: 14220

FEC ID number of contributing federal political committee: C

Name of Employer CBO Glass Occupation: Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 12 / 23 / 2013

**Transaction ID : C9898298**

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 900 Delaware Ave  
Apt 501

City: Buffalo State: NY Zip Code: 14209-2012

FEC ID number of contributing federal political committee: C

Name of Employer Information Requested Occupation: Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 12 / 09 / 2013

**Transaction ID : C9898300**

Amount of Each Receipt this Period: 1000.00

**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 29 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 49 Cleveland Avenue

City State Zip Code  
Buffalo NY 14222

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 05 / 2013

**Transaction ID : C9898302**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**William N. Hudson Jr**

Mailing Address 21 Farmington Rd

City State Zip Code  
Williamsville NY 14221

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

Name of Employer Occupation Information Requested  
Hudson Advisor Services Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 26 / 2013

**Transaction ID : C9898303**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 13 Taylor Drive

City State Zip Code  
West Seneca NY 14224

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

Name of Employer Occupation Information Requested  
Kaleida Health V.P. Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
535.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9898304**

Amount of Each Receipt this Period  
500.00

**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 30 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 708 Lafayette Ave

City Buffalo State NY Zip Code 14222

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

Name of Employer Canisius College Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : C9898305**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 24 Middlesex Road

City Buffalo State NY Zip Code 14216

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : C9898306**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 24 Middlesex Road

City Buffalo State NY Zip Code 14216

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898307**

Amount of Each Receipt this Period  
 1000.00

**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 31 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 195 Brantwood Dr.

City	State	Zip Code
Buffalo	NY	14226

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

Name of Employer	Occupation
Roswell Park Cancer Institute	Deputy Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : C9898310**

Amount of Each Receipt this Period

1000.00

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

Mailing Address 21 Longleat Dr

City	State	Zip Code
Buffalo	NY	14226-4113

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

Name of Employer	Occupation
Information Requested	Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 06 / 2013

**Transaction ID : C9898311**

Amount of Each Receipt this Period

2000.00

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

Mailing Address 4584 Winding Woods Lane

City	State	Zip Code
Hamburg	NY	14075

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

Name of Employer	Occupation
Self-employed	attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 18 / 2013

**Transaction ID : C9898315**

Amount of Each Receipt this Period

500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael Joseph</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 10 Sultan's Court		<b>Transaction ID : C9898313</b>
City Williamsville	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Clover Management	Occupation Information Requested	Election Cycle-to-Date 5000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Michael Joseph</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 10 Sultan's Court		<b>Transaction ID : C9898314</b>
City Williamsville	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer Clover Management	Occupation Information Requested	Election Cycle-to-Date 5000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Paul G. Joyce</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 232 Middlesex Rd		<b>Transaction ID : C9898316</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Colucci & Gallaher	Occupation Attorney	Election Cycle-to-Date 1500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6500.00
<b>TOTAL</b> 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 33 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael J. Keane**

Mailing Address 3 Winterhall Rd

City Orchard Park State NY Zip Code 14127

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

Name of Employer self Occupation attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 10 / 2013

**Transaction ID : C9898317**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 5348 Briercliff Dr.

City Hamburg State NY Zip Code 14075

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

Name of Employer ClearPlan Financial, Inc Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C9898321**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 160 Delaware Ave

City Buffalo State NY Zip Code 14202-2404

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

Name of Employer New Era Cap Co. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C9898322**

Amount of Each Receipt this Period  
 1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. John R. Koelmel</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2013	
Mailing Address 8104 Floss Lane		<b>Transaction ID : C9898323</b>	
City East Amherst	State NY	Zip Code 14051	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. David Kompson</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013	
Mailing Address 43 Court Street, Suite 910		<b>Transaction ID : C9898325</b>	
City Buffalo	State NY	Zip Code 14202	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self-employed	Occupation Consultant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Kenneth A. Krackow</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013	
Mailing Address 58 N Woodside Ln		<b>Transaction ID : C9901515</b>	
City Williamsville	State NY	Zip Code 14221	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer University Orthopaedic Services	Occupation MD/Inventor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 35 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 58 N Woodside Ln

City Williamsville State NY Zip Code 14221

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

Name of Employer University Orthopaedic Services Occupation MD/Inventor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C9901516**

Amount of Each Receipt this Period  
1900.00

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

Mailing Address 4 Centre Drive

City Orchard Park State NY Zip Code 14127

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

Name of Employer The Krog Corp. Occupation Gen. Construction

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898326**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 5620 Meadowglen Dr.

City Clarence Center State NY Zip Code 14032

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

Name of Employer Information Requested Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : C9898330**

Amount of Each Receipt this Period  
1000.00

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

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

3900.00

**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 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cynthia R. Lee</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 45 Bryant Woods N		<b>Transaction ID : C9898348</b>
City Buffalo	State NY	
Zip Code 14228		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Mark Lema</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 155 Roxbury Park		<b>Transaction ID : C9898350</b>
City East Amherst	State NY	
Zip Code 14051		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Roswell Park Cancer Institute	Occupation Professor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Brian Lipke</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address PO Box 2028		<b>Transaction ID : C9898351</b>
City Buffalo	State NY	
Zip Code 14219		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Gibraltar Steel Corp.	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> 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 37 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Loren D. Lobban**

Mailing Address 57 Woodbridge Avenue

City State Zip Code  
Buffalo NY 14214

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

Name of Employer Occupation  
The Bullard Lobban Law Group Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 30 / 2013

**Transaction ID : C9901511**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2718 Route 394

City State Zip Code  
Asheville NY 14710

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

Name of Employer Occupation  
Chautauqua County Health Network Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 12 / 2013

**Transaction ID : C9898352**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 14 Highpoint Ct.

City State Zip Code  
Orchard Park NY 14127

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

Name of Employer Occupation  
Grass Valley Vice President of Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9898354**

Amount of Each Receipt this Period  
1000.00

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

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

2200.00

**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 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jed S. Marcus</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 13 Greene Ave		<b>Transaction ID : C9894095</b>
City Brooklyn	State NY	Zip Code 11238
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer The Marcus Attorneys	Occupation Principal Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Gerard Mazurkiewicz</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 45 Liberty Ln.		<b>Transaction ID : C9898357</b>
City West Seneca	State NY	Zip Code 14224
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Dobkins & Company, LLP	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Gregory A. McDonald</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 9451 Johnson Rd.		<b>Transaction ID : C9898359</b>
City Middleport	State NY	Zip Code 14105
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer best effort	Occupation best effort	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> 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 39 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph D. McDonald**

Mailing Address 23 Dorchester Rd.

City Buffalo State NY Zip Code 14222

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

Name of Employer Catholic Health System Occupation President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898358**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 560 Delaware Ave  
Room 400

City Buffalo State NY Zip Code 14203

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

Name of Employer The McGuire Group Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898360**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 18 Onondaga Ave

City Buffalo State NY Zip Code 14220

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : C9898361**

Amount of Each Receipt this Period  
 1000.00

**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 40 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Allyson McNamara</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 89 N. Shore Drive		<b>Transaction ID : C9898364</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Lancaster Central Schools	Occupation Teacher	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. David McNamara</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 89 North Shore Drive		<b>Transaction ID : C9898363</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Philips Lytle	Occupation attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Patrick McParlane</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 38 Eaglewood Ave		<b>Transaction ID : C9898365</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer J.W. Danforth	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 41 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert E. Mills**

Mailing Address 8799 Stonebriar Dr.

City State Zip Code  
Clarence Center NY 14032

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

Name of Employer Occupation  
Daemen College President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 04 / 2013

**Transaction ID : C9898366**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 47 Bory Dr

City State Zip Code  
Depew NY 14043

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 10 / 2013

**Transaction ID : C9901908**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 23 Lincoln Woods Ln

City State Zip Code  
Buffalo NY 14222-1258

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

Name of Employer Occupation  
Roswell Park Cancer Institute Associate Director for Translational R

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : C9898367**

Amount of Each Receipt this Period  
1000.00

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

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

1300.00

**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 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey P. Mucciarelli**

Mailing Address 3700 Genesee Street

City State Zip Code  
Cheektowaga NY 14225

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

Name of Employer Occupation  
Gabe's Collision President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2013

**Transaction ID : C9898368**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 3389 Middle Road

City State Zip Code  
Dunkirk NY 14048

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

Name of Employer Occupation  
Dunkirk Aviation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898369**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 54 Springbrook Shores

City State Zip Code  
Elma NY 14059

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

Name of Employer Occupation  
retired retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
435.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C9901976**

Amount of Each Receipt this Period  
100.00

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

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

2100.00

**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 115

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NAME OF COMMITTEE (In Full)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James D. Newman**

Mailing Address 58 Rumsey Rd.

City Buffalo State NY Zip Code 14209

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

Name of Employer NOCO Energy Corp. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2013

**Transaction ID : C9898372**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 23 Four Seasons Rd. W

City Buffalo State NY Zip Code 14226

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

Name of Employer NOCO Energy Corp. Occupation Executive VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898373**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael M. O'Mara**

Mailing Address 237 Main St Ste 600

City Buffalo State NY Zip Code 14203-2708

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

Name of Employer best effort Occupation best effort

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898376**

Amount of Each Receipt this Period  
 1000.00

**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 44 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sharon A Osgood</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 04 / 2013
Mailing Address 69 Delaware Ave Rm 702		<b>Transaction ID : C9898377</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self employed	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) <b>B. Marc Panepinto</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 16 / 2013
Mailing Address 153 Bidwell Pkwy		<b>Transaction ID : C9898378</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Cantor Lukasik	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00	

Full Name (Last, First, Middle Initial) <b>C. David Pawlik</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 20 / 2013
Mailing Address 26 Rankin Rd		<b>Transaction ID : C9894100</b>
City Snyder	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> 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 45 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lee H. Perlman</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 10 Orsini Dr.		<b>Transaction ID : C9898379</b>
City Larchmont	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer GNYHA Ventures, Inc.	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Gregory P. Photiadis</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 1800 Main Place Tower		<b>Transaction ID : C9898380</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Duke Holzman Photiades Gresens	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Anthony Picone</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 5000 Spaulding Dr.		<b>Transaction ID : C9898381</b>
City Clarence	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Roswell Park Cancer Institute	Occupation Surgeon	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> 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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 46 OF 115

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NAME OF COMMITTEE (In Full)  
**Brian Higgins for Congress**

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

Mailing Address 205 Portside

City Buffalo State NY Zip Code 14202

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

Name of Employer WNY Urology Associates Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898382**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 61 Dauphin Dr.

City Williamsville State NY Zip Code 14221

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

Name of Employer MJ Mechanical Services Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 12 / 2013

**Transaction ID : C9901968**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 392 Tiburon Ln.

City East Amherst State NY Zip Code 14051

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

Name of Employer Colucci & Gallaher, PC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 10 / 2013

**Transaction ID : C9898383**

Amount of Each Receipt this Period  
 1500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aramis Ramirez</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013	
Mailing Address 213 Canada St.		<b>Transaction ID : C9899589</b>	
City Holland	State NY	Zip Code 14080	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2000.00	
Name of Employer best effort		Occupation best effort	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Kenneth Raske</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013	
Mailing Address 555 W 57th St Ste 1500		<b>Transaction ID : C9899590</b>	
City New York	State NY	Zip Code 10019	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer GNYHA Management Corp.		Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Gordon J. Reger</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 18 / 2013	
Mailing Address 2730 Transit Rd		<b>Transaction ID : C9899593</b>	
City Buffalo	State NY	Zip Code 14224-2523	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer Reger Holdings, LLC		Occupation Chairman	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> 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 48 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gordon J. Reger**

Mailing Address 2730 Transit Rd

City Buffalo State NY Zip Code 14224-2523

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

Name of Employer Reger Holdings, LLC Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9899597**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1100 Colvin Blvd.

City Buffalo State NY Zip Code 14223

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

Name of Employer John W. Danforth Company Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9900064**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 457 Woodlin Ave

City North Tonawanda State NY Zip Code 14120-4742

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

Name of Employer Multisorb Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 04 / 2013

**Transaction ID : C9900066**

Amount of Each Receipt this Period  
 1000.00

**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 49 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert N. Richter**

Mailing Address 2 Hidden Mdws

City Orchard Park State NY Zip Code 14127-3421

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

Name of Employer R&K of Buffalo, Inc. Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 18 / 2013

**Transaction ID : C9900067**

Amount of Each Receipt this Period  
 1000.00

1500.00

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

Mailing Address 44 Middlesex Road

City Buffalo State NY Zip Code 14214

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

Name of Employer paul beltz Occupation ATTY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9900068**

Amount of Each Receipt this Period  
 2500.00

2500.00

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

Mailing Address 522 Linwood Ave.

City Buffalo State NY Zip Code 14209

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

Name of Employer U.S. Attorney's Office Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9900069**

Amount of Each Receipt this Period  
 1000.00

1000.00

**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 50 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Hugh Russ III**

Mailing Address 105 Thomas Jefferson Ln

City State Zip Code  
Snyder NY 14226

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

Name of Employer Occupation  
Hodgson Russ LLP attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 18 / 2013

**Transaction ID : C9900070**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 4121 Taylor Rd.

City State Zip Code  
Orchard Park NY 14127

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

Name of Employer Occupation  
Praxiis Business Advisors Director of Exit Planning and Support

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 06 / 2013

**Transaction ID : C9900071**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 5826 Hunters Creek Road

City State Zip Code  
South Wales NY 14139

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

Name of Employer Occupation  
best effort best effort

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 10 / 2013

**Transaction ID : C9900072**

Amount of Each Receipt this Period  
1000.00

**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 51 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 628 West Ferry

City Buffalo State NY Zip Code 14222

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 06 / 2013

**Transaction ID : C9900073**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 4506 Main Street

City Buffalo State NY Zip Code 14226

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

Name of Employer Information Requested Occupation Information Requested

Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 16 / 2013

**Transaction ID : C9894105**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 274 Fairway Drive

City Amherst State NY Zip Code 14221

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

Name of Employer Information Requested Occupation Information Requested

The Oneida Group Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 10 / 2013

**Transaction ID : C9900074**

Amount of Each Receipt this Period  
 1000.00

**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 52 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George R. Schlemmer**

Mailing Address 693 Seneca St

City Buffalo State NY Zip Code 14210

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

Name of Employer IPL Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9900075**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 187 Main St

City Hamburg State NY Zip Code 14075

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

Name of Employer NY State AG Occupation attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 20 / 2013

**Transaction ID : C9894109**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 163 Virgil Ave.

City Buffalo State NY Zip Code 14216

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

Name of Employer Allpro Parking, LLC Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9900077**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 44 Sterling Ave.

City Lancaster State NY Zip Code 14086

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

Name of Employer Roswell Park Cancer Institute Occupation General Counsel/Chief Institute Operat

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : C9900078**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 426 Franklin St

City Buffalo State NY Zip Code 14202

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

Name of Employer Siegel, Kelleher, and Kahn Occupation attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C9900079**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 58 Sundown Trl

City Buffalo State NY Zip Code 14221-2221

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 10 / 2013

**Transaction ID : C9900080**

Amount of Each Receipt this Period  
 1000.00

**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 54 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 1545 Sweet Rd.

City East Aurora State NY Zip Code 14052

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

Name of Employer Roswell Park Cancer Institute Occupation Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 18 / 2013

**Transaction ID : C9900081**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 196 Northington Dr.

City East Amherst State NY Zip Code 14051

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 20 / 2013

**Transaction ID : C9894110**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 8612 Main Street Suite 4

City Williamsville State NY Zip Code 14221

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

Name of Employer Self-employed Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9900082**

Amount of Each Receipt this Period  
 1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 779 Washington St

City State Zip Code  
Buffalo NY 14203

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

Name of Employer Occupation  
Eastman Machine Company CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 12 / 2013

**Transaction ID : C9900083**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 515 E. 79th St. #12D

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Haynes & Boone, LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 03 / 2013

**Transaction ID : C9894112**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 4042 Foxwood Ln.

City State Zip Code  
Clarence NY 14221

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

Name of Employer Occupation  
Self-employed Investment Banking

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9900084**

Amount of Each Receipt this Period  
1000.00

**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 56 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 6384 OConnor Dr.

City Lockport State NY Zip Code 14094

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

Name of Employer The Bonadio Group Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9900085**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 69 Delaware Ave. Ste. 900

City Buffalo State NY Zip Code 14202

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

Name of Employer Gibson, McAskill & Crosby, LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : C9900086**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Joseph R. Takats III**

Mailing Address 2601 W River Rd.

City Grand Island State NY Zip Code 14072

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

Name of Employer Self Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 10 / 2013

**Transaction ID : C9900090**

Amount of Each Receipt this Period  
 1000.00

**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 57 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 43 Court St

City Buffalo State NY Zip Code 14202

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

Name of Employer Tantillo & Co LLP Occupation accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9900089**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 2238 Hunters Hollow Ln

City Lake View State NY Zip Code 14085-9434

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

Name of Employer Information Requested Occupation Detention Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : C9894113**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 42 Countryside Lane

City Depew State NY Zip Code 14043

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9900087**

Amount of Each Receipt this Period  
 1850.00

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

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

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 58 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paul A. Tokasz</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 42 Countryside Lane		<b>Transaction ID : C9900088</b>
City Depew	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2750.00	

Full Name (Last, First, Middle Initial) <b>B. Donald L. Trump</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 230 North Street Apt. C6		<b>Transaction ID : C9900091</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Roswell Park	Occupation President & CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. David Ulrich</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 468 Locust Street		<b>Transaction ID : C9900092</b>
City Lockport	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Ulrich Development Co., LLC	Occupation Real Estate Developer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2150.00
<b>TOTAL</b> 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 59 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 27 Collins Ct.

City State Zip Code  
Getzville NY 14068

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

Name of Employer Occupation  
Nixon Peabody Strategic Policy Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9900094**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 5611 Kraus Rd

City State Zip Code  
Clarence NY 14031-1342

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

Name of Employer Occupation  
Ferguson Electric President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 18 / 2013

**Transaction ID : C9900095**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 55 Troon Road

City State Zip Code  
East Aurora NY 14052

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 10 / 2013

**Transaction ID : C9900099**

Amount of Each Receipt this Period  
2600.00

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

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

4600.00

**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 60 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Carole Vukelic</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 10 / 2013
Mailing Address 55 Troon Road		<b>Transaction ID : C9900098</b>
City East Aurora	State NY	
Zip Code 14052		Amount of Each Receipt this Period 1400.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Eugene P. Vukelic</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 10 / 2013
Mailing Address 55 Troon Rd		<b>Transaction ID : C9900096</b>
City East Aurora	State NY	
Zip Code 14052		Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00
Name of Employer Try-It Distributing	Occupation Chairman & CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Eugene P. Vukelic</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 10 / 2013
Mailing Address 55 Troon Rd		<b>Transaction ID : C9900097</b>
City East Aurora	State NY	
Zip Code 14052		Amount of Each Receipt this Period 1400.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00
Name of Employer Try-It Distributing	Occupation Chairman & CEO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5400.00
<b>TOTAL</b> 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 61 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John N. Walsh III**

Mailing Address 101 Lexington Avenue

City Buffalo State NY Zip Code 14222

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

Name of Employer Walsh Duffield Occupation President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C9900100**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 5500 Main St #306

City Williamsville State NY Zip Code 14221

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

Name of Employer Ward, Brenon, Kelly & Divita Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9900101**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 4 Rana Ct.

City Williamsville State NY Zip Code 14221

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : C9900102**

Amount of Each Receipt this Period  
 1000.00

**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 62 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Earl Wells III</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2013
Mailing Address 6420 Heise Rd		<b>Transaction ID : C9901032</b>
City Clarence Center	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1600.00
Name of Employer E3 Communications	Occupation Executive	Election Cycle-to-Date 2500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Earl Wells III</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2013
Mailing Address 6420 Heise Rd		<b>Transaction ID : C9901033</b>
City Clarence Center	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer E3 Communications	Occupation Executive	Election Cycle-to-Date 2500.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Joyce Wessel</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2013
Mailing Address 90 Scattertree Ln.		<b>Transaction ID : C9901034</b>
City Orchard Park	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer best effort	Occupation best effort	Election Cycle-to-Date 2000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> 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 63 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Patricia T. Wilson**

Mailing Address 25 Peppermill Ln.

City Orchard Park State NY Zip Code 14127

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

Name of Employer best effort Occupation best effort

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9901036**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 180 Greenaway Road

City Amherst State NY Zip Code 14226

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

Name of Employer best effort Occupation Attorney

Kavinoky Cook LLP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : C9901039**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 5959 Dongal Manor

City Clarence Center State NY Zip Code 14032

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

Name of Employer best effort Occupation best effort

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C9901050**

Amount of Each Receipt this Period  
 1000.00

**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 64 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Howard Zemsky</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 18 / 2013
Mailing Address 181 Morris Avenue		<b>Transaction ID : C9901056</b>
City Buffalo	State Zip Code NY 14214	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Taurus Partners LLP	Occupation Managing Partner	Election Cycle-to-Date 2000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Robert W. Zuchlewski</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 10 / 2013
Mailing Address 5718 Woodruff Dr.		<b>Transaction ID : C9901067</b>
City Clarence Center	State Zip Code NY 14032	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Frontier Group	Occupation COO	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Lawley Ross &amp; Best</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2013
Mailing Address 361 Delaware Ave.		<b>Transaction ID : C9898334</b>
City Buffalo	State Zip Code NY 14202	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Election Cycle-to-Date 1250.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> 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 65 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Michael Lawley</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2013
Mailing Address 361 Delaware Ave		<b>Transaction ID : C9898342</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.33
Name of Employer Lawley Ross & Best	Occupation Partner	<b>[MEMO ITEM]</b> *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 416.67	

Full Name (Last, First, Middle Initial) <b>William Lawley</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2013
Mailing Address 361 Delaware Ave		<b>Transaction ID : C9898340</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.33
Name of Employer Lawley Ross & Best	Occupation Partner	<b>[MEMO ITEM]</b> *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 416.66	

Full Name (Last, First, Middle Initial) <b>Christopher Ross</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2013
Mailing Address 361 Delaware Ave		<b>Transaction ID : C9898337</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.34
Name of Employer Lawley Ross & Best	Occupation Partner	<b>[MEMO ITEM]</b> *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 416.67	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> 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 66 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Amigone Ventures LP**

Mailing Address 2600 Sheridan Dr

City State Zip Code  
Tonawanda NY 14150-9414

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 10 / 2013

**Transaction ID : C9901075**

Amount of Each Receipt this Period  
1000.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 2600 Sheridan Dr

City State Zip Code  
Tonawanda NY 14150-9414

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

Name of Employer Occupation  
Amigone Ventures, LP Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
499.99

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 10 / 2013

**Transaction ID : C9901081**

Amount of Each Receipt this Period  
333.33

**[MEMO ITEM]**  
\*

**C.** Full Name (Last, First, Middle Initial)  
**Anthony P. Amigone Sr.**

Mailing Address 2600 Sheridan Dr

City State Zip Code  
Tonawanda NY 14150-9414

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

Name of Employer Occupation  
Amigone Ventures, LP Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
699.99

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 10 / 2013

**Transaction ID : C9901080**

Amount of Each Receipt this Period  
333.33

**[MEMO ITEM]**  
\*

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Vincent J. Amigone</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 10 / 2013	
Mailing Address 2600 Sheridan Dr		<b>Transaction ID : C9901082</b>	
City Tonawanda	State NY	Zip Code 14150-9414	Amount of Each Receipt this Period 333.34
FEC ID number of contributing federal political committee. C			
Name of Employer Amigone Ventures LP	Occupation Partner		<b>[MEMO ITEM]</b> *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.01		

Full Name (Last, First, Middle Initial) <b>B. Burden, Gulisano &amp; Hickey, LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2013	
Mailing Address 403 Main St. Ste. 605		<b>Transaction ID : C9901083</b>	
City Buffalo	State NY	Zip Code 14203	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		PARTNERSHIP--partners below if itemized
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Donna Burden</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2013	
Mailing Address 403 Main St. Ste. 605		<b>Transaction ID : C9901086</b>	
City Buffalo	State NY	Zip Code 14203	Amount of Each Receipt this Period 333.34
FEC ID number of contributing federal political committee. C			
Name of Employer Burden, Gulisano & Hickey, LLC	Occupation Partner		<b>[MEMO ITEM]</b> *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 333.34		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 68 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Philip M. Gulisano</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 17 / 2013
Mailing Address 403 Main St. Ste. 605		<b>Transaction ID : C9901087</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.33
Name of Employer Burden, Gulisano & Hickey, LLC	Occupation Partner	<b>[MEMO ITEM]</b> *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 333.33	

Full Name (Last, First, Middle Initial) <b>Jonathan S. Hickey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 17 / 2013
Mailing Address 403 Main St. Ste. 605		<b>Transaction ID : C9901088</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.33
Name of Employer Burden, Gulisano & Hickey, LLC	Occupation Partner	<b>[MEMO ITEM]</b> *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 333.33	

Full Name (Last, First, Middle Initial) <b>Carney &amp; Giallanza</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 12 / 2013
Mailing Address 43 Court St. Suite 1102		<b>Transaction ID : C9901094</b>
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	PARTNERSHIP--partners below if itemized
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> 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 69 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Damon Morey, LLP**

Mailing Address Avant Building, Suite 1200  
200 Delaware Avenue

City Buffalo State NY Zip Code 14202

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 04 / 2013

**Transaction ID : C9901096**

Amount of Each Receipt this Period  
2000.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 140 Pearl St  
Suite 100

City Buffalo State NY Zip Code 14203

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 02 / 2013

**Transaction ID : C9901098**

Amount of Each Receipt this Period  
1000.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 625 Delaware Ave  
Ste 304

City Buffalo State NY Zip Code 14202-1007

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 05 / 2013

**Transaction ID : C9901099**

Amount of Each Receipt this Period  
1350.00

PARTNERSHIP--partners below if itemized

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

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

4350.00

**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 70 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 131 Highland Ave.

City Buffalo State NY Zip Code 14222

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

Name of Employer Mosey Perisco, LLP Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1083.34**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : C9901110**

Amount of Each Receipt this Period  
 450.00

**[MEMO ITEM]**  
\*

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

Mailing Address 625 Delaware Ave.  
Suite 304

City Buffalo State NY Zip Code 14202

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

Name of Employer Mosey Persico LLP Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1083.33**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : C9901106**

Amount of Each Receipt this Period  
 450.00

**[MEMO ITEM]**  
\*

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

Mailing Address 231 Richmond Ave  
Apt 8

City Buffalo State NY Zip Code 14222

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

Name of Employer Mosey Persico LLP Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1083.33**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : C9901109**

Amount of Each Receipt this Period  
 450.00

**[MEMO ITEM]**  
\*

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

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

0.00

**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 71 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mosey Persico, LLP</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2013
Mailing Address 625 Delaware Ave Ste 304		<b>Transaction ID : C9901100</b>
City Buffalo	State NY Zip Code 14202-1007	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 650.00
Name of Employer	Occupation	PARTNERSHIP--partners below if itemized
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3250.00	

Full Name (Last, First, Middle Initial) <b>B. Shannon Heneghan</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2013
Mailing Address 131 Highland Ave.		<b>Transaction ID : C9901111</b>
City Buffalo	State NY Zip Code 14222	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 216.67
Name of Employer Mosey Persico, LLP	Occupation Partner	<b>[MEMO ITEM]</b> *
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1083.34	

Full Name (Last, First, Middle Initial) <b>C. Acea Mosey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2013
Mailing Address 625 Delaware Ave. Suite 304		<b>Transaction ID : C9901107</b>
City Buffalo	State NY Zip Code 14202	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 216.66
Name of Employer Mosey Persico LLP	Occupation Partner	<b>[MEMO ITEM]</b> *
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1083.33	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 72 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Jennifer Persico</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2013
Mailing Address 231 Richmond Ave Apt 8		<b>Transaction ID : C9901108</b>
City Buffalo	State NY	
Zip Code 14222		Amount of Each Receipt this Period 216.67
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b> *
Name of Employer Mosey Persico LLP	Occupation Partner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1083.33	

Full Name (Last, First, Middle Initial) <b>Murphy Meyers, LLP</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2013
Mailing Address 6506 E Quaker St Ste 200		<b>Transaction ID : C9901112</b>
City Orchard Park	State NY	
Zip Code 14127-2502		Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		PARTNERSHIP--partners below if itemized
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4600.00	

Full Name (Last, First, Middle Initial) <b>Cheryl Meyers Meyers Buth</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2013
Mailing Address 6506 E Quaker St Ste 200		<b>Transaction ID : C9901115</b>
City Orchard Park	State NY	
Zip Code 14127-2502		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b> *
Name of Employer Murphy Meyers, LLP	Occupation Partner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> 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 73 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Margaret A. Murphy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2013	
Mailing Address 5354 Briercliff Drive		<b>Transaction ID : C9901113</b>	
City Hamburg	State NY	Zip Code 14075	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer self	Occupation attorney		<b>[MEMO ITEM]</b> *
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2300.00		

Full Name (Last, First, Middle Initial) <b>B. R&amp;P Oak Hill Development, LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 16 / 2013	
Mailing Address 3556 Lake Shore Rd Ste 620		<b>Transaction ID : C9901119</b>	
City Buffalo	State NY	Zip Code 14219-1460	Amount of Each Receipt this Period _____ 600.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer		Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3000.00		PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial) <b>C. Gary Bichler</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 16 / 2013	
Mailing Address 3556 Lakeshore Rd Suite 620		<b>Transaction ID : C9901131</b>	
City Buffalo	State NY	Zip Code 14219	Amount of Each Receipt this Period _____ 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer R&P Oak Hill Development, LLC		Occupation Partner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		<b>[MEMO ITEM]</b> *

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 600.00
<b>TOTAL</b> 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 74 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 3556 Lake Shore Rd  
Ste 620

City Buffalo State NY Zip Code 14219-1460

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

Name of Employer R&P Oak Hill Development, LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9901126**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**  
\*

**B.** Full Name (Last, First, Middle Initial)  
**R&P Oak Hill Development, LLC**

Mailing Address 3556 Lake Shore Rd  
Ste 620

City Buffalo State NY Zip Code 14219-1460

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9901122**

Amount of Each Receipt this Period  
400.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 3556 Lakeshore Rd  
Suite 620

City Buffalo State NY Zip Code 14219

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

Name of Employer R&P Oak Hill Development, LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9901132**

Amount of Each Receipt this Period  
200.00

**[MEMO ITEM]**  
\*

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

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

400.00

**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 75 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 3556 Lake Shore Rd  
Ste 620

City Buffalo State NY Zip Code 14219-1460

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

Name of Employer R&P Oak Hill Development, LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9901125**

Amount of Each Receipt this Period  
200.00

**[MEMO ITEM]**  
\*

**B.** Full Name (Last, First, Middle Initial)  
**Rupp, Baase, Pfalzgraf, Cunningham & Coppola, LLC**

Mailing Address 1600 Liberty Building

City Buffalo State NY Zip Code 14202

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 02 / 2013

**Transaction ID : C9901136**

Amount of Each Receipt this Period  
1000.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 140 John James Audubon Parkway

City Amherst State NY Zip Code 14228

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2013

**Transaction ID : C9901519**

Amount of Each Receipt this Period  
1000.00

PARTNERSHIP--partners below if itemized

**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 76 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 19 Devonshire Rd.

City Buffalo State NY Zip Code 14223

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

Name of Employer Wendel Duchscherer Architects & Engine Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

Transaction ID : C9902696

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\*

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / 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).....

0.00

210475.00

**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 77 OF 115	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AKIN, GUMP, STRAUSS, HAUER & FELD LLP CIVIC ACTION COMMITTEE**

Mailing Address 1333 NEW HAMPSHIRE AVE/NW STE 400

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer	Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		16		2013

**Transaction ID : C9901133**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Association for Justice PAC**

Mailing Address 777 6TH STREET, NW  
SUITE 200

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer	Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		05		2013

**Transaction ID : C9901137**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 325 Seventh Street NW  
Suite 700

City	State	Zip Code
Washington	DC	20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer	Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		16		2013

**Transaction ID : C9901140**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 78 OF 115

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NAME OF COMMITTEE (In Full)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AT&T Federal PAC**

Mailing Address 208 S. Akard Street  
 Suite 3521

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : C9901141**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION POLIT**

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2013

**Transaction ID : C9901142**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Boilermakers-Blacksmiths Legislative Education-Act**

Mailing Address 753 State Avenue  
 Suite 565

City Kansas City State KS Zip Code 66101

FEC ID number of contributing federal political committee. **C** C00005157

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 18 / 2013

**Transaction ID : C9894122**

Amount of Each Receipt this Period  
 1000.00

**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 79 OF 115
<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITE**

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00001016**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9901143**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA**

Mailing Address 601 Pennsylvania Avenue NW  
South Building Suite 600B

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 14 / 2013

**Transaction ID : C9901144**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**DRIVE - DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUC**

Mailing Address 25 Louisiana Ave. NW

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 12 / 2013

**Transaction ID : C9901145**

Amount of Each Receipt this Period  
5000.00

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

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FORD MOTOR COMPANY CIVIC ACTION FUND**

Mailing Address P.O. BOX 75000, PAC SVS MC 2250

City State Zip Code  
DETROIT MI 48275

FEC ID number of contributing federal political committee. **C** C00046474

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 / 2013

**Transaction ID : C9901522**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Friends of Anthony M. Masiello**

Mailing Address 115 Frontenac Avenue

City State Zip Code  
Buffalo NY 14216

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 26 / 2013

**Transaction ID : C9898356**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Friends of Frank Clark**

Mailing Address PO Box 445

City State Zip Code  
Buffalo NY 14201

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 18 / 2013

**Transaction ID : C9897037**

Amount of Each Receipt this Period  
500.00

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

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

2500.00



**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 81 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Friends of John LaFalce</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2013	
Mailing Address 92 Crestwood Ave		<b>Transaction ID : C9898331</b>	
City Buffalo	State NY	Zip Code 14216	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Friends of Mark Schroeder</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 05 / 2013	
Mailing Address PO Box 743		<b>Transaction ID : C9900076</b>	
City Buffalo	State NY	Zip Code 14220-0743	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1460.00	

Full Name (Last, First, Middle Initial) <b>GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 18 / 2013	
Mailing Address 1299 Pennsylvania Ave NW STE 1100		<b>Transaction ID : C9901148</b>	
City Washington	State DC	Zip Code 20004	
FEC ID number of contributing federal political committee. C C00024869		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> 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 82 OF 115
	<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)  
**Brian Higgins for Congress**

**A. GENERAL MOTORS CORPORATION CIVIC INVOLVEMENT PROGRAM**

Full Name (Last, First, Middle Initial)  
Mailing Address 25 MASSACHUSETTS AVENUE, NW  
SUITE 400

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00076810**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 24 / 2013

**Transaction ID : C9901149**

Amount of Each Receipt this Period  
2000.00

**B. HSBC USA INC BIPARTISAN POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address ONE HSBC CENTER

City BUFFALO State NY Zip Code 14203

FEC ID number of contributing federal political committee. **C C00139774**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9901146**

Amount of Each Receipt this Period  
1500.00

**C. INDEPENDENT HEALTH ASSOCIATION INC POLITICAL ALLIA**

Full Name (Last, First, Middle Initial)  
Mailing Address 2495 KENSINGTON AVENUE

City BUFFALO State NY Zip Code 14226

FEC ID number of contributing federal political committee. **C C00323758**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C9901147**

Amount of Each Receipt this Period  
1000.00

**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 83 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeremy Zellner for Chair of Erie County Democratic Committee**

Mailing Address 19 Elmwood Park S

City State Zip Code  
Tonawanda NY 14150-3313

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2013

**Transaction ID : C9901052**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 410 1ST ST, SE  
SUITE 310

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C C00362384**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2013

**Transaction ID : C9894123**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address P.O. Box 73

City State Zip Code  
Buffalo NY 14220

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9898319**

Amount of Each Receipt this Period  
 1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 115
	<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)  
**Brian Higgins for Congress**

**A. KEYCORP ADVOCATES FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 127 PUBLIC SQUARE  
 OH-01-27-1816  
 City CLEVELAND State OH Zip Code 44114  
 FEC ID number of contributing federal political committee. **C C00073155**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013  
**Transaction ID : C9901151**  
 Amount of Each Receipt this Period  
 1000.00

**B. Lockheed Martin PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2121 CRYSTAL DRIVE  
 SUITE 100  
 City ARLINGTON State VA Zip Code 22202  
 FEC ID number of contributing federal political committee. **C C00303024**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 26 / 2013  
**Transaction ID : C9901152**  
 Amount of Each Receipt this Period  
 1000.00

**C. M & T BANK PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 465 MAIN STREET  
 SUITE 500  
 City BUFFALO State NY Zip Code 14203  
 FEC ID number of contributing federal political committee. **C C00137273**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : C9901154**  
 Amount of Each Receipt this Period  
 1000.00

**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 85 OF 115
	<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)  
**Brian Higgins for Congress**

**A. MACHINISTS NON PARTISAN POLITICAL LEAGUE**

Full Name (Last, First, Middle Initial)  
MACHINISTS NON PARTISAN POLITICAL LEAGUE

Mailing Address 9000 Machinists Place

City State Zip Code  
Upper Marlboro MD 20772

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9901153**

Amount of Each Receipt this Period  
 5000.00

**B. NFG FEDPAC**

Full Name (Last, First, Middle Initial)  
NFG FEDPAC

Mailing Address 6363 MAIN STREET

City State Zip Code  
WILLIAMSVILLE NY 14221

FEC ID number of contributing federal political committee. **C** C00083758

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C9901523**

Amount of Each Receipt this Period  
 1000.00

**C. NIXON PEABODY LLP PAC**

Full Name (Last, First, Middle Initial)  
NIXON PEABODY LLP PAC

Mailing Address 1300 CLINTON SQUARE

City State Zip Code  
ROCHESTER NY 14604

FEC ID number of contributing federal political committee. **C** C00404178

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C9901157**

Amount of Each Receipt this Period  
 1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 115
	<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)  
**Brian Higgins for Congress**

**A. Nuclear Energy Institute Federal Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1201 F ST NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00239848**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 23 / 2013

**Transaction ID : C9901155**

Amount of Each Receipt this Period  
 1000.00

**B. Seneca Nation of Indians**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 231

City Salamanca State NY Zip Code 14779

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C9901156**

Amount of Each Receipt this Period  
 1000.00

**C. TIME WARNER CABLE INC. FEDERAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 901 F STREET, NW  
SUITE 800

City WASHINGTON State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : C9901158**

Amount of Each Receipt this Period  
 1000.00

**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 87 OF 115
	<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)  
**Brian Higgins for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TOMPAC FEDERAL MULTICANDIDATE COMMITTEE**

Mailing Address 228 S. WASHINGTON ST.  
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00364174

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : C9901159**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

45500.00

**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 88 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Brian Higgins</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013
Mailing Address 43 Morgan Rd		<b>Transaction ID : C9901526</b>
City Buffalo	State Zip Code NY 14220	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 94.90
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1209.00	

Full Name (Last, First, Middle Initial) <b>Brian Higgins</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013
Mailing Address 43 Morgan Rd		<b>Transaction ID : C9901527</b>
City Buffalo	State Zip Code NY 14220	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 79.61
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1209.00	

Full Name (Last, First, Middle Initial) <b>Brian Higgins</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013
Mailing Address 43 Morgan Rd		<b>Transaction ID : C9901528</b>
City Buffalo	State Zip Code NY 14220	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.71
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1209.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	242.22
<b>TOTAL</b> 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 89 OF 115
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>Brian Higgins</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 43 Morgan Rd		<b>Transaction ID : C9901529</b>
City Buffalo	State Zip Code NY 14220	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 88.53
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1209.00	

Full Name (Last, First, Middle Initial) <b>Brian Higgins</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 43 Morgan Rd		<b>Transaction ID : C9901530</b>
City Buffalo	State Zip Code NY 14220	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 96.42
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1209.00	

Full Name (Last, First, Middle Initial) <b>Brian Higgins</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 43 Morgan Rd		<b>Transaction ID : C9901531</b>
City Buffalo	State Zip Code NY 14220	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 74.47
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1209.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	259.42
<b>TOTAL</b> 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 90 OF 115
	<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)  
**Brian Higgins for Congress**

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

Mailing Address 43 Morgan Rd

City Buffalo State NY Zip Code 14220

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1209.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C9901532**

Amount of Each Receipt this Period  
69.87

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

Mailing Address 43 Morgan Rd

City Buffalo State NY Zip Code 14220

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1209.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C9901533**

Amount of Each Receipt this Period  
77.78

**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 Information Requested 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).....

147.65

649.29

**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 91 OF 115
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>M&amp;T Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2013
Mailing Address 1 Fountain Plz		<b>Transaction ID : C9902069</b>
City Buffalo	State NY Zip Code 14203	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 23.01
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 243.47	

Full Name (Last, First, Middle Initial) <b>M&amp;T Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 1 Fountain Plz		<b>Transaction ID : C9902071</b>
City Buffalo	State NY Zip Code 14203	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 23.78
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 243.47	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	46.79
<b>TOTAL</b> This Period (last page this line number only).....	46.79

**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 92 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 5800 Windward Parkway		Amount of Each Disbursement this Period 102.48 <b>Transaction ID : D464392</b>
City Alpharetta	State GA	
Zip Code 30005	Purpose of Disbursement payroll processing fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ADP, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 5800 Windward Parkway		Amount of Each Disbursement this Period 7.00 <b>Transaction ID : D464402</b>
City Alpharetta	State GA	
Zip Code 30005	Purpose of Disbursement state fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. ADP, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 5800 Windward Parkway		Amount of Each Disbursement this Period 112.98 <b>Transaction ID : D464403</b>
City Alpharetta	State GA	
Zip Code 30005	Purpose of Disbursement payroll processing fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	222.46
<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 93 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP, Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013		
Mailing Address 5800 Windward Parkway			Amount of Each Disbursement this Period 606.45		
City Alpharetta	State GA	Zip Code 30005	Transaction ID : D464404		
Purpose of Disbursement payroll taxes		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. ADP, Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013		
Mailing Address 5800 Windward Parkway			Amount of Each Disbursement this Period 7.00		
City Alpharetta	State GA	Zip Code 30005	Transaction ID : D464405		
Purpose of Disbursement state fee		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. ADP, Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013		
Mailing Address 5800 Windward Parkway			Amount of Each Disbursement this Period 102.48		
City Alpharetta	State GA	Zip Code 30005	Transaction ID : D464406		
Purpose of Disbursement payroll processing fee		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	715.93
<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 94 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 5800 Windward Parkway		Amount of Each Disbursement this Period 606.45 <b>Transaction ID : D464407</b>
City Alpharetta	State GA	
Zip Code 30005	Purpose of Disbursement payroll taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ADP, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 5800 Windward Parkway		Amount of Each Disbursement this Period 7.00 <b>Transaction ID : D464408</b>
City Alpharetta	State GA	
Zip Code 30005	Purpose of Disbursement state fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. ADP, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 5800 Windward Parkway		Amount of Each Disbursement this Period 860.93 <b>Transaction ID : D464409</b>
City Alpharetta	State GA	
Zip Code 30005	Purpose of Disbursement payroll taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1474.38
<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 95 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ally</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address PO Box 380901		Amount of Each Disbursement this Period 536.92
City Minneapolis	State MN	
Zip Code 55438-0901	Purpose of Disbursement car lease	<b>Transaction ID : D464399</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ally</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address PO Box 380901		Amount of Each Disbursement this Period 536.92
City Minneapolis	State MN	
Zip Code 55438-0901	Purpose of Disbursement car lease	<b>Transaction ID : D464400</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Ally</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address PO Box 380901		Amount of Each Disbursement this Period 536.92
City Minneapolis	State MN	
Zip Code 55438-0901	Purpose of Disbursement car lease	<b>Transaction ID : D464401</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1610.76
<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 96 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Am Pol Eagle</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 3620 Harlem Road		Amount of Each Disbursement this Period 67.90 <b>Transaction ID : D464334</b>
City Cheektowaga	State NY	
Zip Code 14215	Purpose of Disbursement advertisement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address P.O. Box 537104		Amount of Each Disbursement this Period 353.89 <b>Transaction ID : D464395</b>
City Atlanta	State GA	
Zip Code 30353	Purpose of Disbursement cell phones	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address P.O. Box 537104		Amount of Each Disbursement this Period 292.98 <b>Transaction ID : D464396</b>
City Atlanta	State GA	
Zip Code 30353	Purpose of Disbursement cell phones	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	714.77
<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 97 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address P.O. Box 537104		Amount of Each Disbursement this Period 301.21 <b>Transaction ID : D464397</b>
City Atlanta	State GA	
Zip Code 30353	Purpose of Disbursement cell phones	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address P.O. Box 537104		Amount of Each Disbursement this Period 302.39 <b>Transaction ID : D464398</b>
City Atlanta	State GA	
Zip Code 30353	Purpose of Disbursement cell phones	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Buffalo Rocket Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1249 Hertel Ave.		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : D464336</b>
City Buffalo	State NY	
Zip Code 14216-1702	Purpose of Disbursement advertisement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	703.60
<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 98 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Buffalo Rocket Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 1249 Hertel Ave.		Amount of Each Disbursement this Period 6100.00 <b>Transaction ID : D464316</b>
City Buffalo	State NY	
Zip Code 14216-1702	Purpose of Disbursement advertisement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Dennis Dargavel</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 1110 Abbott Rd		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : D464320</b>
City Buffalo	State NY	
Zip Code 14220	Purpose of Disbursement fundraising consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Dennis Dargavel</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 1110 Abbott Rd		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : D464295</b>
City Buffalo	State NY	
Zip Code 14220	Purpose of Disbursement fundraising consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6100.00
<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 99 OF 115		
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dennis Dargavel</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 1110 Abbott Rd		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : D464276</b>
City Buffalo	State NY	
Zip Code 14220	Purpose of Disbursement fundraising consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ditondo's Tavern</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 370 Seneca		Amount of Each Disbursement this Period 625.00 <b>Transaction ID : D464285</b>
City Buffalo	State NY	
Zip Code 14210	Purpose of Disbursement event expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. EJ Mays Scholarship Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 505 Delaware Ave.		Amount of Each Disbursement this Period 240.00 <b>Transaction ID : D464321</b>
City Buffalo	State NY	
Zip Code 14202	Purpose of Disbursement donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3865.00
<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 100 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elim Christian Fellowship</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013	
Mailing Address P.O. Box 145			Amount of Each Disbursement this Period 500.00	
City Buffalo	State NY	Zip Code 14210	Transaction ID : <b>D464333</b>	
Purpose of Disbursement donation		Category/ Type 012		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Hispanics United of Buffalo</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013	
Mailing Address 254 Virginia Street			Amount of Each Disbursement this Period 250.00	
City Buffalo	State NY	Zip Code 14201	Transaction ID : <b>D464254</b>	
Purpose of Disbursement donation		Category/ Type 012		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. National Democratic Club</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013	
Mailing Address 30 Ivy St SE			Amount of Each Disbursement this Period 10.00	
City Washington	State DC	Zip Code 20003	Transaction ID : <b>D464281</b>	
Purpose of Disbursement dues		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	760.00
<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 101 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN Software, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 1101 15th Street, NW Suite 500		Amount of Each Disbursement this Period 1650.00 <b>Transaction ID : D464283</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement quarterly software fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Oliver's Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 2095 Delaware Ave.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D464308</b>
City Buffalo State NY Zip Code 14216	Purpose of Disbursement event expense 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Oliver's Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 2095 Delaware Ave.		Amount of Each Disbursement this Period 6975.26 <b>Transaction ID : D464319</b>
City Buffalo State NY Zip Code 14216	Purpose of Disbursement event expense 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9125.26
<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 102 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Parkside Community Association</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 2318 Main St		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : D464302</b>
City Buffalo	State NY	
Zip Code 14214-2323	Purpose of Disbursement donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Partners' Press</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 1881 Kenmore Ave		Amount of Each Disbursement this Period 499.16 <b>Transaction ID : D464299</b>
City Kenmore	State NY	
Zip Code 14217	Purpose of Disbursement printing invites	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Partners' Press</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 1881 Kenmore Ave		Amount of Each Disbursement this Period 1164.63 <b>Transaction ID : D464253</b>
City Kenmore	State NY	
Zip Code 14217	Purpose of Disbursement printing invites	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1763.79
<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 103 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 166.51 <b>Transaction ID : D464466</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement credit card processing fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PUSH</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address c/o Aaron Bartley 271 Grant St		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D464339</b>
City Buffalo	State NY Zip Code 14213	
Purpose of Disbursement donation	Category/Type 012	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Schaeffer Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 600 Pennsylvania Ave SE		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : D464279</b>
City Washington	State DC Zip Code 20003	
Purpose of Disbursement PAC fundraising consultant	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3916.51
<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 104 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Schaeffer Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 600 Pennsylvania Ave SE			Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : D464289</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement PAC fundraising consultant		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Schaeffer Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 600 Pennsylvania Ave SE			Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : D464323</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement PAC fundraising consultant		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. South Buffalo Alive</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 12 Coolidge Road			Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D464335</b>
City West Seneca	State NY	Zip Code 14220	
Purpose of Disbursement donation		Category/ Type 012	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7250.00
<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 105 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. UAW Awards Dinner</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013		
Mailing Address c/o Region 9 UAW 35 George Karl Blvd, Suite 100			Amount of Each Disbursement this Period 320.00		
City Amherst	State NY	Zip Code 14221	Transaction ID : <b>D464257</b>		
Purpose of Disbursement donation		Category/ Type 012			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Zenger Group</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013		
Mailing Address PO Box 647			Amount of Each Disbursement this Period 198.57		
City Buffalo	State NY	Zip Code 14207	Transaction ID : <b>D464251</b>		
Purpose of Disbursement invites		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Zenger Group</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013		
Mailing Address PO Box 647			Amount of Each Disbursement this Period 646.64		
City Buffalo	State NY	Zip Code 14207	Transaction ID : <b>D464252</b>		
Purpose of Disbursement postage		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1165.21
<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 106 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Zenger Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address PO Box 647		Amount of Each Disbursement this Period 411.63 <b>Transaction ID : D464284</b>
City Buffalo	State NY	
Zip Code 14207	Purpose of Disbursement invites	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Zenger Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address PO Box 647		Amount of Each Disbursement this Period 484.71 <b>Transaction ID : D464291</b>
City Buffalo	State NY	
Zip Code 14207	Purpose of Disbursement postage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Zenger Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address PO Box 647		Amount of Each Disbursement this Period 1019.89 <b>Transaction ID : D464293</b>
City Buffalo	State NY	
Zip Code 14207	Purpose of Disbursement postage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1916.23
<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 107 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. M&amp;T Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 1 Fountain Plz		Amount of Each Disbursement this Period 2816.43 <b>Transaction ID : D464378</b>
City Buffalo	State NY	
Zip Code 14203	Purpose of Disbursement credit card	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. M&amp;T Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 1 Fountain Plz		Amount of Each Disbursement this Period 7167.47 <b>Transaction ID : D464379</b>
City Buffalo	State NY	
Zip Code 14203	Purpose of Disbursement credit card	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. M&amp;T Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 1 Fountain Plz		Amount of Each Disbursement this Period 2008.34 <b>Transaction ID : D464380</b>
City Buffalo	State NY	
Zip Code 14203	Purpose of Disbursement credit card	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11992.24
<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 108 OF 115			
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 5800 Windward Parkway		Amount of Each Disbursement this Period 1543.95 <b>Transaction ID : D464383</b>
City Alpharetta	State GA	
Purpose of Disbursement payroll		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lyndsey Barnes</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 104 Tuscarora Rd		Amount of Each Disbursement this Period 1543.95 <b>Transaction ID : D464384</b> <b>[MEMO ITEM]</b>
City Buffalo	State NY	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ADP, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 5800 Windward Parkway		Amount of Each Disbursement this Period 1543.95 <b>Transaction ID : D464385</b>
City Alpharetta	State GA	
Purpose of Disbursement payroll		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3087.90
<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 109 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lyndsey Barnes</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 104 Tuscarora Rd		Amount of Each Disbursement this Period 1543.95
City Buffalo	State NY	
Zip Code 14220-2055	Purpose of Disbursement payroll	Transaction ID : D464386
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADP, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 5800 Windward Parkway		Amount of Each Disbursement this Period 1543.95
City Alpharetta	State GA	
Zip Code 30005	Purpose of Disbursement payroll	Transaction ID : D464387
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lyndsey Barnes</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 104 Tuscarora Rd		Amount of Each Disbursement this Period 1543.95
City Buffalo	State NY	
Zip Code 14220-2055	Purpose of Disbursement payroll	Transaction ID : D464388
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1543.95
<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 110 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 5800 Windward Parkway		Amount of Each Disbursement this Period 819.42 <b>Transaction ID : D464390</b>
City Alpharetta	State GA	
Zip Code 30005	Purpose of Disbursement payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Lyndsey Barnes</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 104 Tuscarora Rd		Amount of Each Disbursement this Period 819.42 <b>Transaction ID : D464391</b> <b>[MEMO ITEM]</b>
City Buffalo	State NY	
Zip Code 14220-2055	Purpose of Disbursement payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" 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).....	819.42
<b>TOTAL</b> This Period (last page this line number only).....	58747.41

**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 111 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Erie County Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 18 / 2013</b>
Mailing Address <b>671 Seneca Street</b>		Amount of Each Disbursement this Period <b>250.00</b> <b>Transaction ID : D464318</b>
City <b>Buffalo</b> State <b>NY</b> Zip Code <b>14210</b>	Purpose of Disbursement political contribution <b>011</b> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Erie County Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2013</b>
Mailing Address <b>671 Seneca Street</b>		Amount of Each Disbursement this Period <b>3000.00</b> <b>Transaction ID : D464282</b>
City <b>Buffalo</b> State <b>NY</b> Zip Code <b>14210</b>	Purpose of Disbursement political contribution <b>011</b> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Erie County Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2013</b>
Mailing Address <b>671 Seneca Street</b>		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : D464256</b>
City <b>Buffalo</b> State <b>NY</b> Zip Code <b>14210</b>	Purpose of Disbursement political contribution <b>011</b> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>8250.00</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 112 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends of Joe Jerge</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2013</b>
Mailing Address <b>179 S. Shore Blvd.</b>		Amount of Each Disbursement this Period <b>250.00</b> <b>Transaction ID : D464275</b>
City <b>Lackawanna</b> State <b>NY</b> Zip Code <b>14218</b>	Purpose of Disbursement political contribution <b>011</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Lovely Warren</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2013</b>
Mailing Address <b>P.O. Box 15587</b>		Amount of Each Disbursement this Period <b>250.00</b> <b>Transaction ID : D464266</b>
City <b>Rochester</b> State <b>NY</b> Zip Code <b>14615</b>	Purpose of Disbursement political contribution <b>011</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jeremy Zellner for Chair of Erie County Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2013</b>
Mailing Address <b>19 Elmwood Park S</b>		Amount of Each Disbursement this Period <b>150.00</b> <b>Transaction ID : D464249</b>
City <b>Tonawanda</b> State <b>NY</b> Zip Code <b>14150-3313</b>	Purpose of Disbursement political contribution <b>011</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>650.00</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 113 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Niagara County Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 7687 Highland Dr		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D464255</b>
City Gasport	State NY Zip Code 14067	
Purpose of Disbursement political contribution	011 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Real Conservatives of Erie County</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 2026 Abbott Road		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D464288</b>
City Lackawanna	State NY Zip Code 14218	
Purpose of Disbursement political contribution	011 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sean Ryan for Assembly</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address PO Box 457		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D464298</b>
City Buffalo	State NY Zip Code 14213-0457	
Purpose of Disbursement political contribution	011 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1450.00
<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 114 OF 115	
	<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)  
**Brian Higgins for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sean Ryan for Assembly</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address PO Box 457		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D464304</b>
City Buffalo	State NY	
Zip Code 14213-0457	Purpose of Disbursement political contribution	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Town of Tonawanda Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 32 Fenwick Ave		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D464300</b>
City Tonawanda	State NY	
Zip Code 14150	Purpose of Disbursement political contribution	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Town of Tonawanda Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 32 Fenwick Ave		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : D464271</b>
City Tonawanda	State NY	
Zip Code 14150	Purpose of Disbursement political contribution	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1175.00
<b>TOTAL</b> This Period (last page this line number only).....	11525.00

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

NAME OF COMMITTEE (In Full)

**Brian Higgins for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ADP, Inc</b>		Nature of Debt (Purpose):
Mailing Address 5800 Windward Parkway		
City State	Zip Code	
Alpharetta	GA 30005	

Outstanding Balance Beginning This Period	<b>Transaction ID : C7369</b>	
<input type="text" value="60.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="60.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ADP, Inc</b>		Nature of Debt (Purpose):
Mailing Address 5800 Windward Parkway		
City State	Zip Code	
Alpharetta	GA 30005	

Outstanding Balance Beginning This Period	<b>Transaction ID : C7370</b>	
<input type="text" value="435.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="435.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ADP, Inc</b>		Nature of Debt (Purpose):
Mailing Address 5800 Windward Parkway		
City State	Zip Code	
Alpharetta	GA 30005	

Outstanding Balance Beginning This Period	<b>Transaction ID : C5489763</b>	
<input type="text" value="45.12"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="45.12"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="540.12"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="540.12"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="540.12"/>