

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

Citizens for Boyle

ADDRESS (number and street)

499 S. Capitol St. SW

Suite 422

Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

C C00543363

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

PA

13

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 2015

through

M M /

D D /

Y Y Y Y 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lindsay Angerholzer

Signature of Treasurer Lindsay Angerholzer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2016

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Citizens for Boyle

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))....	<input type="text" value="179391.66"/>	<input type="text" value="604871.61"/>
(b) Total Contribution Refunds (from Line 20(d))	<input type="text" value="10.00"/>	<input type="text" value="1320.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	<input type="text" value="179381.66"/>	<input type="text" value="603551.61"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<input type="text" value="56195.66"/>	<input type="text" value="237685.88"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value="41.00"/>	<input type="text" value="530.64"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	<input type="text" value="56154.66"/>	<input type="text" value="237155.24"/>
8. Cash on Hand at Close of Reporting Period (from Line 27).....	<input type="text" value="689969.39"/>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="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

Citizens for Boyle

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	77610.00	192614.50
(ii) Unitemized.....	2281.66	8276.66
(iii) TOTAL of contributions from individuals ▶	79891.66	200891.16
(b) Political Party Committees.....	0.00	8.67
(c) Other Political Committees (such as PACs).....	99500.00	402750.00
(d) The Candidate.....	0.00	1221.78
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	179391.66	604871.61
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	41.00	530.64
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	989.96	1030.13
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	180422.62	606432.38

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	56195.66	237685.88
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	40000.00
(b) Of All Other Loans	0.00	5481.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	45481.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	10.00	320.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	10.00	1320.00
21. OTHER DISBURSEMENTS	40800.00	44726.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	97005.66	329212.88

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	606552.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	180422.62
25. SUBTOTAL (add Line 23 and Line 24).....	786975.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	97005.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	689969.39

**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 104
	<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	

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)
Citizens for Boyle

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

Mailing Address 345 W End Ave
Apt 1A

City State Zip Code
New York NY 10024-6887

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

Name of Employer Occupation
Webb & Tyler LLP Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2015

Transaction ID : C10627273

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
Hector R Ayala

Mailing Address 4735 Oakland St

City State Zip Code
Philadelphia PA 19124

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

Name of Employer Occupation
Hispanic Community Counseling Services CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 14 / 2015

Transaction ID : C10629267

Amount of Each Receipt this Period
2000.00

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

Mailing Address 77 5th Ave
Apt 17D

City State Zip Code
New York NY 10003-3055

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

Name of Employer Occupation
Self-employed Self-employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2015

Transaction ID : C10627269

Amount of Each Receipt this Period
750.00

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 6 OF 104
	<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)
Citizens for Boyle

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

Mailing Address 751 Riverton Rd

City State Zip Code
Moorestown NJ 08057-1918

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

Name of Employer Occupation
Bayada Home Health Care Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 18 / 2015

Transaction ID : C10627288

Amount of Each Receipt this Period
5400.00

B. Full Name (Last, First, Middle Initial)
Jeffrey A. Barrack

Mailing Address 3300 Two Commerce Square
2001 Market St.

City State Zip Code
Philadelphia PA 19103

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

Name of Employer Occupation
Barrack, Rodos & Bacine Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 13 / 2015

Transaction ID : C10629268

Amount of Each Receipt this Period
2000.00

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

Mailing Address 5020 Gloria Ave

City State Zip Code
Encino CA 91436-1529

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

Name of Employer Occupation
By Nancy Graphic Designer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : C10628937

Amount of Each Receipt this Period
1000.00

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

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

8400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Donna Bender

Mailing Address 4630 Noeline Ave

City Encino State CA Zip Code 91436-2104

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

Name of Employer none Occupation none

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628938

Amount of Each Receipt this Period
 500.00

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

Mailing Address 122 E 42nd St
FI 34

City New York State NY Zip Code 10168-3499

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

Name of Employer Trinet Occupation Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : C10627275

Amount of Each Receipt this Period
 750.00

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

Mailing Address 925 W Market St

City Bethlehem State PA Zip Code 18018-5016

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

Name of Employer Self-Market Street Strategies, LLC Occupation Political and Business Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : C10617118

Amount of Each Receipt this Period
 500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Melvin Brosterman

Mailing Address 25 Murray St
Apt 6E

City State Zip Code
New York NY 10007-2299

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

Name of Employer Occupation
Partner Stroock & Stroock & Lavan LLP Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 18 / 2015

Transaction ID : C10627270

Amount of Each Receipt this Period
1500.00

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

Mailing Address 5265 Genesta Ave

City State Zip Code
Encino CA 91316-2617

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : C10628939

Amount of Each Receipt this Period
1000.00

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

Mailing Address 104 Chinaberry Drive

City State Zip Code
Lafayette Hill PA 19444

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

Name of Employer Occupation
Parkloco Business mentor/advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 30 / 2015

Transaction ID : C10629275

Amount of Each Receipt this Period
500.00

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 9 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Donald R. Caldwell

Mailing Address 531 N. Rose Lane

City Haverford State PA Zip Code 19041

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

Name of Employer Cross Atlantic Capital Partners, Inc. Occupation Venture Capitalist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : C10617876

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Michael Cardone Jr.

Mailing Address 24 N. Bryn Mawr Ave.
PMB #153

City Bryn Mawr State PA Zip Code 19010

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

Name of Employer Cardone Industries Occupation Founder and President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : C10629269

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 305 Airdale Rd

City Bryn Mawr State PA Zip Code 19010-2805

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

Name of Employer RMA Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 27 / 2015

Transaction ID : C10616586

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 10 OF 104
	<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)
Citizens for Boyle

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

Mailing Address 14701 Valley Vista Blvd

City Sherman Oaks	State CA	Zip Code 91403-4114
----------------------	-------------	------------------------

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

Name of Employer University of California	Occupation Professor
--	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628940

Amount of Each Receipt this Period
500.00

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

Mailing Address 2129 Basswood Dr

City Lafayette Hill	State PA	Zip Code 19444-2332
------------------------	-------------	------------------------

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

Name of Employer Royer Cooper Cohen Braunfeld LLC	Occupation Lawyer
--	----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : C10626756

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2129 Basswood Dr

City Lafayette Hill	State PA	Zip Code 19444-2332
------------------------	-------------	------------------------

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

Name of Employer MLM Family Enterprises, LLC	Occupation CEO
---	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : C10626757

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: PAGE 11 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Alyce de Toledo

Mailing Address 3611 Longridge Ave

City Sherman Oaks State CA Zip Code 91423-4917

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

Name of Employer N/A Occupation N/A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628943

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Philip de Toledo

Mailing Address 3611 Longridge Ave

City Sherman Oaks State CA Zip Code 91423-4917

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

Name of Employer Capital Group Companies Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628941

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Louis J DeCree Jr.

Mailing Address 13037 Lindsay St

City Philadelphia State PA Zip Code 19116-1715

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

Name of Employer Arch Insurance Group Occupation VP, Ceded Reinsurance Claims

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : C10617228

Amount of Each Receipt this Period
 250.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Susan DiGiacomo

Mailing Address 100 Citadel Ct

City North Wales State PA Zip Code 19454

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

Name of Employer Self Occupation Funeral Home Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : C10621769

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 9630 Milnore St

City Philadelphia State PA Zip Code 19114

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

Name of Employer Finigan's Wake Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : C10629477

Amount of Each Receipt this Period
 500.00

* In-Kind: Tickets for Fundraiser

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

Mailing Address 325 N End Ave

City New York State NY Zip Code 10282-1026

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

Name of Employer Lowenstein Sandler LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : C10627274

Amount of Each Receipt this Period
 10.00

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

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

1510.00

**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 13 OF 104

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Imri Eisner

Mailing Address 325 N End Ave

City State Zip Code
 New York NY 10282-1026

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

Name of Employer Occupation
 Lowenstein Sandler LLP Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : C10627279

Amount of Each Receipt this Period
 750.00

B. Full Name (Last, First, Middle Initial)
Scott V. Fainor

Mailing Address 3050 Fairfield Drive

City State Zip Code
 Allentown PA 18103-5542

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

Name of Employer Occupation
 National Penn Bank CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : C10616910

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Charles E Feldman

Mailing Address 9679 Pine Rd

City State Zip Code
 Philadelphia PA 19115-2747

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

Name of Employer Occupation
 Garden of Earthly Delights Retail Store owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : C10629237

Amount of Each Receipt this Period
 250.00

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: PAGE 14 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Marc Felgoise

Mailing Address 7139 Sheaff Ln

City State Zip Code
Fort Washington PA 19034-2007

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

Name of Employer Occupation
Intersect Advisers Business Advisery

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : C10626763

Amount of Each Receipt this Period
500.00

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

Mailing Address 1717 Calle Lilas

City State Zip Code
San Juan PR 00927-6353

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

Name of Employer Occupation
RETIRED RETIRED BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : C10628277

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Mary Jane Fernandez

Mailing Address 1717 Calle Lilas

City State Zip Code
San Juan PR 00927-6353

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : C10628278

Amount of Each Receipt this Period
2700.00

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

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

5900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 104
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) Vlademiro Fichera		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 18 / 2015
Mailing Address 2038 Washington Ave # 2052		Transaction ID : C10629238
City Philadelphia	State Zip Code PA 19146-2832	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer VJF Enterprises Inc	Occupation Principal	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Anna Firshein		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 18 / 2015
Mailing Address 300 Mercer St Apt 21B		Transaction ID : C10627268
City New York	State Zip Code NY 10003-6739	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) Steven Fishman		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 16830 Ventura Blvd Ste 400		Transaction ID : C10628944
City Encino	State Zip Code CA 91436-1726	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Fishman, Block and Diamond	Occupation CPA	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Glenn Freeman

Mailing Address 3861 Woodfield Dr

City Sherman Oaks State CA Zip Code 91403-4230

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

Name of Employer NSB Associates Occupation Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628948

Amount of Each Receipt this Period
 500.00

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

Mailing Address 1011 Madison Lane

City Newtown Square State PA Zip Code 19073

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

Name of Employer Diversified Search Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : C10621772

Amount of Each Receipt this Period
 500.00

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

Mailing Address 5345 Oak Park Ave.

City Encino State CA Zip Code 91316

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

Name of Employer Webster Kaplan Sprunger LLP Occupation Counsel

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10633141

Amount of Each Receipt this Period
 500.00

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: PAGE 17 OF 104
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Len Gelman

Mailing Address 3420 Paper Mill Rd

City State Zip Code
Huntingdon Valley PA 19006-3724

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

Name of Employer Occupation
United Lenders Mortgage Self Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 11 / 2015

Transaction ID : C10620166

Amount of Each Receipt this Period
250.00

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

Mailing Address 682 Cherrydale Drive

City State Zip Code
Lafayette Hill PA 19444

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

Name of Employer Occupation
Barrack Rodos Bacine Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 13 / 2015

Transaction ID : C10629271

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Richard J. Green

Mailing Address 970 Rock Creek Rd

City State Zip Code
Bryn Mawr PA 19010-1923

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

Name of Employer Occupation
Firsttrust Bank CEO & Vice Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : C10617877

Amount of Each Receipt this Period
500.00

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 18 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Joseph Grieboski

Mailing Address 6178 Castletown Way

City Alexandria State VA Zip Code 22310-1634

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

Name of Employer Grieboski Global Strategies Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : C10623758

Amount of Each Receipt this Period
 500.00

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

Mailing Address 7700 Kencot Ct

City Raleigh State NC Zip Code 27615-5452

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

Name of Employer IDEAL Fastener Corporation Occupation Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : C10627272

Amount of Each Receipt this Period
 750.00

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

Mailing Address 248 E 94th St

City New York State NY Zip Code 10128-3706

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

Name of Employer Rich Relevance Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : C10627223

Amount of Each Receipt this Period
 1750.00

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 19 OF 104
	<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)
Citizens for Boyle

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

Mailing Address 46 Warwick Rd

City Haddonfield State NJ Zip Code 08033-3705

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

Name of Employer Hazzouri and Associates Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2015

Transaction ID : C10609941

Amount of Each Receipt this Period
 500.00

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

Mailing Address PO Box 69

City Gloucester City State NJ Zip Code 08030-0069

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

Name of Employer Holt Logistics Occupation Exec

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629282

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Jocelyn Hong Lowe

Mailing Address 2346 South Queen Street

City Arlington State VA Zip Code 22202

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

Name of Employer Twenty First Century Group Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : C10629266

Amount of Each Receipt this Period
 250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Scott Howard

Mailing Address 20608 Oaksboro Cir

City Woodland Hills State CA Zip Code 91364-5667

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

Name of Employer BPE&H Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628954

Amount of Each Receipt this Period
500.00

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

Mailing Address 4326 Bergamo Dr

City Encino State CA Zip Code 91436-3304

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

Name of Employer BPE&H Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628953

Amount of Each Receipt this Period
500.00

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

Mailing Address 2482 Oakshore Dr

City Westlake Vlg State CA Zip Code 91361-3416

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

Name of Employer self-employed Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628955

Amount of Each Receipt this Period
500.00

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 21 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Abraham Knoll

Mailing Address 506 Lenox Ave

City State Zip Code
New York NY 10037

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

Name of Employer Occupation
Department of Radiology Columbia Unive Doctor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : C10627229

Amount of Each Receipt this Period
750.00

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

Mailing Address 16153 Valley Meadow Place

City State Zip Code
Encino CA 91436

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

Name of Employer Occupation
Capital Group Portfolio Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629284

Amount of Each Receipt this Period
2700.00

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

Mailing Address 16153 Valley Meadow Place

City State Zip Code
Encino CA 91436

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

Name of Employer Occupation
Capital Group Portfolio Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629283

Amount of Each Receipt this Period
2700.00

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

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

6150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Metodija Koloski

Mailing Address 1355 17th St NW
Apt 503

City Washington State DC Zip Code 20036-1935

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

Name of Employer United Macedonian Diaspora Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : C10622286

Amount of Each Receipt this Period
250.00

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

Mailing Address 10769 Jeanes St

City Philadelphia State PA Zip Code 19116-3315

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

Name of Employer Amerihealth Caritas Occupation Sr. Healthcare Analyst

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **925.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : C10622287

Amount of Each Receipt this Period
50.00

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

Mailing Address 17142 Otsego St

City Encino State CA Zip Code 91316-3419

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

Name of Employer Imprint Consulting Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628956

Amount of Each Receipt this Period
500.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 104
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Noah Marcus		Date of Receipt M M / D D / Y Y Y Y Y 12 / 22 / 2015
Mailing Address 184 Joralemon St Apt 8B		Transaction ID : C10627714
City Brooklyn	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Development corporation for Israel	Occupation Partner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) B. Sandra Matthew		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015
Mailing Address 29355 Castlehill Dr		Transaction ID : C10628957
City Agoura Hills	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Property Manager	Occupation Real Estate	
Receipt For: 2016 <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) C. Christopher McGill		Date of Receipt M M / D D / Y Y Y Y Y 11 / 18 / 2015
Mailing Address 233 Pine St.		Transaction ID : C10629242
City Philadelphia	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer East River Bank	Occupation President & CE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Kerry McKenney

Mailing Address 4822 30th St S

City: Arlington State: VA Zip Code: 22206-1508

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

Name of Employer: Consultant Occupation: Monument Strategies

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 12 / 04 / 2015

Transaction ID : C10623568

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Richard F. McMenamain

Mailing Address 7815 Roanoke St

City: Philadelphia State: PA Zip Code: 19118-4031

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

Name of Employer: Morgan Lewis & Bockius LLP Occupation: Senior Counsel

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 10 / 30 / 2015

Transaction ID : C10621776

Amount of Each Receipt this Period: 500.00

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

Mailing Address 3930 Valley Meadow Road

City: Encino State: CA Zip Code: 91436

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

Name of Employer: The Adam and Gila Milstein Family Foun Occupation: Co Founder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 10 / 23 / 2015

Transaction ID : C10617878

Amount of Each Receipt this Period: 1000.00

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 25 OF 104
	<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)
Citizens for Boyle

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

Mailing Address 4078 Sapphire Dr

City Encino State CA Zip Code 91436-3647

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628958

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
George E. Norcross III

Mailing Address 1087 Springdale Rd

City Cherry Hill State NJ Zip Code 08003-2935

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

Name of Employer Connor Strong & Buckelew Occupation Executive Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629286

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
George E. Norcross III

Mailing Address 1087 Springdale Rd

City Cherry Hill State NJ Zip Code 08003-2935

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

Name of Employer Connor Strong & Buckelew Occupation Executive Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629285

Amount of Each Receipt this Period
 2700.00

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

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

5900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Elliot Norry

Mailing Address 1224 Tockington Ct.

City: Jenkintown State: PA Zip Code: 19046

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

Name of Employer: Adaptimmune US Occupation: Head of Clinical Safety

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 30 / 2015

Transaction ID : C10629287

Amount of Each Receipt this Period: 500.00

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

Mailing Address 320 Brown St
Unit 6

City: Philadelphia State: PA Zip Code: 19123-2254

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

Name of Employer: Greenwood Racing, Inc. Occupation: Chief Marketing Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 15 / 2015

Transaction ID : C10626762

Amount of Each Receipt this Period: 500.00

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

Mailing Address 654 Anthony Rd

City: Elkins Park State: PA Zip Code: 19027-1702

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

Name of Employer: Aelux Occupation: Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 15 / 2015

Transaction ID : C10626760

Amount of Each Receipt this Period: 500.00

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 27 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Bohdan Pazuniak

Mailing Address 216 Wyncote Rd

City Jenkintown State PA Zip Code 19046-3131

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

Name of Employer self Occupation engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : C10617577

Amount of Each Receipt this Period
100.00

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

Mailing Address 109 Rossmore Dr

City Malvern State PA Zip Code 19355-3179

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

Name of Employer Fox Chase Bank Occupation President/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : C10621779

Amount of Each Receipt this Period
750.00

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

Mailing Address 1075 Chester Springs Rd

City Phoenixville State PA Zip Code 19460-2116

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

Name of Employer University of Penna Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2015

Transaction ID : C10616480

Amount of Each Receipt this Period
100.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 104
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Brian J Preski		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 14 / 2015
Mailing Address 9901 Player Dr		Transaction ID : C10629272
City Philadelphia	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Not Employed	Occupation None	
Receipt For: 2016 <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. Sean M. Reilly		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2015
Mailing Address 826 Kerper St		Transaction ID : C10629288
City Philadelphia	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Roscommon International	Occupation President & CEO	
Receipt For: 2016 <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) C. Adele Reznikoff		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 15708 Woodvale Rd		Transaction ID : C10628959
City Encino	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation N/A	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 29 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Alex Rindner

Mailing Address 275 W 96th St
Apt 11F

City State Zip Code
New York NY 10025-6267

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

Name of Employer Occupation
Avery Companies Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : C10627276

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
Lee Rosen, MD

Mailing Address 4550 Rubio Ave

City State Zip Code
Encino CA 91436-3202

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

Name of Employer Occupation
ULCA School of Medicine Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628960

Amount of Each Receipt this Period
500.00

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

Mailing Address 1343 Ascot Pl

City State Zip Code
Philadelphia PA 19116-1501

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 18 / 2015

Transaction ID : C10629243

Amount of Each Receipt this Period
200.00

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

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

1450.00

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

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

FOR LINE NUMBER: PAGE 30 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Susan Rosenthal

Mailing Address 1343 Ascot Pl

City Philadelphia State PA Zip Code 19116-1501

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 14 / 2015

Transaction ID : C10629273

Amount of Each Receipt this Period
300.00

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

Mailing Address 104 Pine Tree Lane

City Plymouth Meeting State PA Zip Code 19462

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

Name of Employer Rosnov Jewelers Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 13 / 2015

Transaction ID : C10629274

Amount of Each Receipt this Period
500.00

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

Mailing Address 5036 Veloz Ave

City Tarzana State CA Zip Code 91356-4514

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

Name of Employer Warner Bros Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : C10628961

Amount of Each Receipt this Period
500.00

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 31 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Jay Schulman

Mailing Address 16201 Meadowridge Way

City Encino State CA Zip Code 91436-3608

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

Name of Employer JRK Asset Management Occupation Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628962

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 4704 Louise Ave

City Encino State CA Zip Code 91316-3925

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

Name of Employer Jones Day Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10628963

Amount of Each Receipt this Period
 500.00

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

Mailing Address 400 W 63rd St
Apt 2301

City New York State NY Zip Code 10069-0451

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

Name of Employer NextGen Management Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : C10627267

Amount of Each Receipt this Period
 1750.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Daniel Tavakoli

Mailing Address 400 E 71st St
Apt 17I

City State Zip Code
New York NY 10021-4817

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

Name of Employer Occupation
Kirkland & Ellis Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2015

Transaction ID : C10627707

Amount of Each Receipt this Period
750.00

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

Mailing Address 14320 Ventura Blvd
#196

City State Zip Code
Sherman Oaks CA 91423-2717

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

Name of Employer Occupation
PrimeLending Mortgage Banker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : C10628964

Amount of Each Receipt this Period
500.00

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

Mailing Address 126 Newport Ln

City State Zip Code
North Wales PA 19454-1458

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

Name of Employer Occupation
Omni Health Services Inc business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 13 / 2015

Transaction ID : C10620419

Amount of Each Receipt this Period
250.00

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: PAGE 33 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Ben Turk

Mailing Address 108 Lexington Ave

City State Zip Code
New York NY 10016-8927

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

Name of Employer Occupation
Oracle Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : C10627271

Amount of Each Receipt this Period
 750.00

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

Mailing Address 116 Llanfair Rd

City State Zip Code
Ardmore PA 19003-2501

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

Name of Employer Occupation
John A. Steer Co. Logistics executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : C10616895

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 513 Attesburg Road

City State Zip Code
Villanova PA 19085-1028

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

Name of Employer Occupation
Stevens & Lee Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : C10626759

Amount of Each Receipt this Period
 500.00

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: PAGE 34 OF 104
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Saul Ewing LLP

Mailing Address 1500 Market St
38th Fl

City Philadelphia State PA Zip Code 19102

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : C10621781

Amount of Each Receipt this Period
 1000.00

PARTNERSHIP--partners below if itemized

B. Full Name (Last, First, Middle Initial)
Richard W. Hayden Sr.

Mailing Address 401 Green Ln

City Philadelphia State PA Zip Code 19128-3305

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

Name of Employer Occupation
Saul Ewing LLP Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : C10633142

Amount of Each Receipt this Period
 1000.00

[MEMO ITEM]
*

C. Full Name (Last, First, Middle Initial)
Faust Family Trust

Mailing Address 1260 Vallecita Dr.

City Santa Fe State NM Zip Code 87501

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629279

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 35 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Halley S. Faust

Mailing Address 1260 Vallecita Dr.

City Santa Fe State NM Zip Code 87501

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

Name of Employer University of New Mexico Occupation Immediate Past President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629280

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Obermayer Rebmann Maxwell & Hippel

Mailing Address 1617 John F Kennedy Blvd
FI 19

City Philadelphia State PA Zip Code 19103-1833

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629292

Amount of Each Receipt this Period
500.00

PARTNERSHIP--partners below if itemized

C. Full Name (Last, First, Middle Initial)
Thomas A. Leonard

Mailing Address 1617 John F Kennedy Blvd
FI 19

City Philadelphia State PA Zip Code 19103-1833

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

Name of Employer Obermayer Rebmann Maxwell & Hippel LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629301

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
*

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

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

500.00

**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 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Stradley Ronon Stevens & Young, LLP

Mailing Address 2005 Market St
Ste 2600

City Philadelphia State PA Zip Code 19103-7018

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : C10629293

Amount of Each Receipt this Period
500.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 2005 Market St
Ste 2600

City Philadelphia State PA Zip Code 19103-7018

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

Name of Employer Occupation
Stradley Ronan Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015

Transaction ID : C10633143

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
*

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

77610.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
ABBVIE POLITICAL ACTION COMMITTEE

Mailing Address **1 N. WAUKEGAN ROAD**

City **NORTH CHICAGO** State **IL** Zip Code **60064**

FEC ID number of contributing federal political committee. **C C00536573**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 14 / 2015

Transaction ID : C10629328

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AIR PRODUCTS AND CHEMICALS, INC. POLITICAL ALLIANCE

Mailing Address **P.O. BOX 441**

City **TREXLERTOWN** State **PA** Zip Code **18087**

FEC ID number of contributing federal political committee. **C C00127258**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 16 / 2015

Transaction ID : C10629311

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN AIRLINES INC. POLITICAL ACTION COMMITTEE

Mailing Address **1101 17TH STREET N.W.
SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00107300**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 18 / 2015

Transaction ID : C10629329

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: PAGE 38 OF 104
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 Connecticut Ave NW
Ste 600

City Washington State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2016
 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 / 2015

Transaction ID : C10629312

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Council of Engineering Companies

Mailing Address 1015 15TH ST. NW
SUITE 802

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00010868**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2015

Transaction ID : C10629330

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 101 NORTH 3RD STREET

City MOORHEAD State MN Zip Code 56560

FEC ID number of contributing federal political committee. **C C00110338**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2015

Transaction ID : C10621767

Amount of Each Receipt this Period
5000.00

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: PAGE 39 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF GOVT. EMPL. POLITICAL ACTION COMMITTEE

Mailing Address **80 F STREET, NW**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00009936**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : C10629355

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN SUGARBEET GROWERS ASSOCIATION PAC

Mailing Address **1156 15TH STREET NW
SUITE 1101**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00167684**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2015

Transaction ID : C10629331

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AQUA AMERICA, INC. H2O POLITICAL ACTION COMMITTEE

Mailing Address **762 WEST LANCASTER AVENUE**

City **BRYN MAWR** State **PA** Zip Code **19010**

FEC ID number of contributing federal political committee. **C C00340455**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 04 / 2015

Transaction ID : C10621760

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

1000.00

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

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

FOR LINE NUMBER: PAGE 40 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
AQUA AMERICA, INC. H2O POLITICAL ACTION COMMITTEE

Mailing Address **762 WEST LANCASTER AVENUE**

City **BRYN MAWR** State **PA** Zip Code **19010**

FEC ID number of contributing federal political committee. **C C00340455**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 14 / 2015

Transaction ID : C10629332

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address **208 S. AKARD STREET SUITE 2701**

City **DALLAS** State **TX** Zip Code **75202**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2015

Transaction ID : C10629333

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

Mailing Address **101 CONSTIUTION AVENUE, NW 10TH FLOOR WEST**

City **WASHINGTON** State **DC** Zip Code **20001**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 20 / 2015

Transaction ID : C10629324

Amount of Each Receipt this Period
5000.00

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

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

7500.00

**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 104
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial)
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address **1101 PENNSYLVANIA AVENUE NW #1000**

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00008474**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 21 2015

Transaction ID : C10629364

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
COBHAM HOLDINGS INC - COBHAM ANALYTIC SOLUTIONS PAC

Mailing Address **401 DIAMOND DR**

City State Zip Code
HUNTSVILLE AL 35806

FEC ID number of contributing federal political committee. **C C00347401**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
12 16 2015

Transaction ID : C10629336

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address **1701 JFK BLVD, 49TH FLOOR**

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **10000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 04 2015

Transaction ID : C10621763

Amount of Each Receipt this Period
1000.00

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 42 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial)
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

A. Mailing Address 100 INDIANA AVE., N. W.

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 01 / 2015

Transaction ID : C10629326

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
COMMUNICATION WORKERS OF AMERICA LOCAL 13000 PAC

B. Mailing Address 2124 RACE STREET

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00109595

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2015

Transaction ID : C10621773

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
COZEN O'CONNOR POLITICAL ACTION COMMITTEE

C. Mailing Address 1900 MARKET STREET

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00312777

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 01 / 2015

Transaction ID : C10617879

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 43 OF 104
	<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)
Citizens for Boyle

A. DEMOCRATS RESHAPING AMERICA (DREAMPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 410 1 ST, SE
SUITE 310
City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00423079**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629433

Amount of Each Receipt this Period
 1000.00

B. DUANE MORRIS GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 30 S 17th St
City Philadelphia State PA Zip Code 19103-4016

FEC ID number of contributing federal political committee. **C C00364133**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : C10629337

Amount of Each Receipt this Period
 1500.00

C. ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address LILLY CORPORATE CENTER
City INDIANAPOLIS State IN Zip Code 46285

FEC ID number of contributing federal political committee. **C C00082792**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : C10617880

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 44 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
ENDO PHARMACEUTICALS INC POLITICAL ACTION COMMITTEE (ENDO PAC)

Mailing Address 1400 ATWATER DRIVE

City State Zip Code
MALVERN PA 19355

FEC ID number of contributing federal political committee. **C C00452052**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2015

Transaction ID : C10617881

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
FLORIDA SUGAR CANE LEAGUE PAC

Mailing Address 1301 PENNSYLVANIA AVE NW STE 401

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00012328**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629435

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
HOOSIERS FIRST PAC

Mailing Address PO BOX 772

City State Zip Code
INDIANAPOLIS IN 46206

FEC ID number of contributing federal political committee. **C C00492082**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : C10629351

Amount of Each Receipt this Period
 1000.00

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

3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L STREET, NW
SUITE 900

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : C10629325

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC

Mailing Address 1750 NEW YORK AVE NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629436

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)

Mailing Address 1601 K STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2015

Transaction ID : C10629313

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: PAGE 46 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC

Mailing Address 905 16TH ST., N.W.
SECOND FLOOR

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00007922**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : C10632756

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
LINCOLN NATIONAL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1300 SOUTH CLINTON STREET

City FORT WAYNE State IN Zip Code 46802

FEC ID number of contributing federal political committee. **C C00110577**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 21 / 2015

Transaction ID : C10629353

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MACHINISTS NON PARTISAN POLITICAL LEAGUE OF THE INTERNATIONAL ASSOCIATION OF MACHINISTS & AEROSPACE WORKERS

Mailing Address 9000 Machinists Place

City Upper Marlboro State MD Zip Code 20772

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 30 / 2015

Transaction ID : C10621775

Amount of Each Receipt this Period
5000.00

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 47 OF 104
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015

Transaction ID : C10629315

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629437

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF POSTMASTERS OF THE UNITED STATES (NA

Mailing Address 8 HERBERT STREET

City State Zip Code
ALEXANDRIA VA 22305

FEC ID number of contributing federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2015

Transaction ID : C10629314

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: PAGE 48 OF 104
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015

Transaction ID : C10629316

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL POSTAL MAIL HANDLERS UNION - DIVISION OF LABORERS' INT'L UNION OF NORTH AMERICA

Mailing Address 905 16TH ST., NW

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00345306**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : C10629354

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
New York Life Insurance Political Action Committee

Mailing Address 51 MADISON AVENUE
ROOM 1109

City State Zip Code
NEW YORK NY 10010

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : C10616911

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: PAGE 49 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
NUCLEAR ENERGY INSTITUTE FEDERAL POLITICAL ACTION COMMITTEE

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 09 / 2015

Transaction ID : C10629338

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
PROFESSIONAL COMPOUNDING CENTERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 9901 SOUTH WILCREST DR

City HOUSTON State TX Zip Code 77099

FEC ID number of contributing federal political committee. **C C00558452**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 06 / 2015

Transaction ID : C10617882

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
PRUDENTIAL FINANCIAL INC. FEDERAL POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL FEDERAL PAC)

Mailing Address 751 BROAD STREET
14TH FLOOR

City NEWARK State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C C00127779**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : C10629339

Amount of Each Receipt this Period
1500.00

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: PAGE 50 OF 104
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial)
SHEET METAL AND AIR CONDITIONING CONTRACTORS POLITICAL ACTION COMMITTEE

Mailing Address 4201 LAFAYETTE CENTER DRIVE

City State Zip Code
CHANTILLY VA 20151

FEC ID number of contributing federal political committee. **C** C00013961

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015

Transaction ID : C10629319

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE

Mailing Address 1750 NEW YORK AVENUE, NW

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : C10616912

Amount of Each Receipt this Period
 5000.00

Full Name (Last, First, Middle Initial)
SIEMENS CORPORATION PAC

Mailing Address 300 NEW JERSEY AVENUE, NW
SUITE 1000

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00353797

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2015

Transaction ID : C10629317

Amount of Each Receipt this Period
 1000.00

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

6500.00

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

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

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

FOR LINE NUMBER: PAGE 51 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
SNAKE RIVER SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1951 SOUTH SATURN WAY
SUITE 100

City State Zip Code
BOISE ID 83709

FEC ID number of contributing federal political committee. **C C00326389**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : C10629342

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
TEAMSTERS JOINT COUNCIL 53 POLITICAL ACTION COMMITTEE

Mailing Address 3460 NORTH DELAWARE AVENUE
SUITE 310

City State Zip Code
PHILADELPHIA PA 19134

FEC ID number of contributing federal political committee. **C C00178541**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 22 / 2015

Transaction ID : C10629434

Amount of Each Receipt this Period
 4000.00

C. Full Name (Last, First, Middle Initial)
TEVA PHARMACEUTICALS USA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 440

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00434811**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : C10629344

Amount of Each Receipt this Period
 2500.00

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

7500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : C10616908

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : C10629334

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Mailing Address 701 Pennsylvania Ave NW
Ste 750

City Washington State DC Zip Code 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10629379

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 53 OF 104
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC

Mailing Address **601 THIRTEENTH STREET NW
STE 910 S**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00542365**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		16		2015

Transaction ID : C10629320

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Mailing Address **8000 EAST JEFFERSON**

City **DETROIT** State **MI** Zip Code **48214**

FEC ID number of contributing federal political committee. **C C00002840**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		14		2015

Transaction ID : C10629345

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
UNITE HERE TIP CAMPAIGN COMMITTEE

Mailing Address **275 7TH AVENUE 11TH FLOOR**

City **NEW YORK** State **NY** Zip Code **10001**

FEC ID number of contributing federal political committee. **C C00004861**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2015

Transaction ID : C10617883

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 54 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
UNITE HERE TIP CAMPAIGN COMMITTEE

Mailing Address **275 7TH AVENUE 11TH FLOOR**

City **NEW YORK** State **NY** Zip Code **10001**

FEC ID number of contributing federal political committee. **C C00004861**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 09 / 2015

Transaction ID : C10617884

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
UNITED STATES BEET SUGAR ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address **1156 15TH STREET NW SUITE 1019**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00063586**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 30 / 2015

Transaction ID : C10621782

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)

Mailing Address **1300 I ST NW, STE 400 WEST
ATTN: TAYLOR CRAIG**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 29 / 2015

Transaction ID : C10616913

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: PAGE 55 OF 104
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
WAKEFERN FOOD CORP. POLITICAL ACTION COMMITTEE

Mailing Address 33 NORTHFIELD AVENUE

City State Zip Code
EDISON NJ 08818

FEC ID number of contributing federal political committee. **C** C00489005

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : C10621783

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
WELLS FARGO AND COMPANY EMPLOYEE PAC (AKA WELLS FARGO EMPLOYEE PAC)

Mailing Address SIXTH AND MARQUETTE
MAC N9305-084

City State Zip Code
MINNEAPOLIS MN 55479

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : C10629349

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1101 PENNSYLVANIA AVE, NW
6TH FLOOR

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00251843

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : C10629438

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 56 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
ZENECA INC. POLITICAL ACTION COMMITTEE

Mailing Address **C/O ZENECA INC.**
1800 CONCORD PIKE, PO BOX 15437

City **WILMINGTON** State **DE** Zip Code **19850**

FEC ID number of contributing federal political committee. **C C00279455**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : C10629356

Amount of Each Receipt this Period
1000.00

Amount of Each Receipt this Period
2000.00

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

99500.00

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

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

FOR LINE NUMBER: PAGE 57 OF 104
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 336 Pennsylvania Ave

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **986.89**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : C10617873

Amount of Each Receipt this Period
150.68

B. Full Name (Last, First, Middle Initial)
Capital One Bank

Mailing Address 336 Pennsylvania Ave

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **986.89**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : C10629224

Amount of Each Receipt this Period
411.08

C. Full Name (Last, First, Middle Initial)
Capital One Bank

Mailing Address 336 Pennsylvania Ave

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **986.89**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : C10629225

Amount of Each Receipt this Period
425.13

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

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

986.89

986.89

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2015
Mailing Address P.O. Box 619616, MD 5675		Amount of Each Disbursement this Period 198.10 Transaction ID : D531266
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2015
Mailing Address P.O. Box 619616, MD 5675		Amount of Each Disbursement this Period 427.10 Transaction ID : D531267
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2015
Mailing Address P.O. Box 619616, MD 5675		Amount of Each Disbursement this Period 2.00 Transaction ID : D531268
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	627.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 104		
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2015
Mailing Address P.O. Box 619616, MD 5675		Amount of Each Disbursement this Period 288.80 Transaction ID : D531269
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2015
Mailing Address P.O. Box 619616, MD 5675		Amount of Each Disbursement this Period 288.80 Transaction ID : D531270
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address P.O. Box 619616, MD 5675		Amount of Each Disbursement this Period 593.20 Transaction ID : D533401
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1170.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address P.O. Box 619616, MD 5675		Amount of Each Disbursement this Period 166.30
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel	Transaction ID : D533402
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address P.O. Box 619616, MD 5675		Amount of Each Disbursement this Period 25.00
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel	Transaction ID : D533406
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address P.O. Box 619616, MD 5675		Amount of Each Disbursement this Period 8.79
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel	Transaction ID : D533420
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	200.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address P.O. Box 619616, MD 5675		Amount of Each Disbursement this Period 25.00 Transaction ID : D533422
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 60 Massachusetts Ave NE		Amount of Each Disbursement this Period 86.00 Transaction ID : D533410
City Washington	State DC	
Zip Code 20002-4285	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 60 Massachusetts Ave NE		Amount of Each Disbursement this Period 170.00 Transaction ID : D531265
City Washington	State DC	
Zip Code 20002-4285	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	281.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 137.99 Transaction ID : D531288
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Travel Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 180.00 Transaction ID : D531289
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Travel Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 500.00 Transaction ID : D531226
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Compliance Fee Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	817.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Bookkeeping	
Candidate Name	Category/Type	Transaction ID : D531227
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	
Candidate Name	Category/Type	Transaction ID : D531228
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	
Candidate Name	Category/Type	Transaction ID : D531229
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 1203.79
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser - Catering	
Candidate Name	Category/Type	Transaction ID : D531242
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 586.35
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser - Catering	
Candidate Name	Category/Type	Transaction ID : D531243
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 170.00
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Food and Meals	
Candidate Name	Category/Type	Transaction ID : D531253
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1960.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 7.92
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Food and Meals	
Candidate Name	Category/Type	Transaction ID : D531254
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 25.00
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Telephone	
Candidate Name	Category/Type	Transaction ID : D531260
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 18.82
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : D533414
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	51.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 350.00 Transaction ID : D533415
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 26.00 Transaction ID : D533416
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 1938.02 Transaction ID : D533394
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Travel - Lodging	
Candidate Name	Category/Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2314.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015		
Mailing Address 499 S Capitol St SW Ste 422			Amount of Each Disbursement this Period 672.76		
City Washington	State DC	Zip Code 20003-4028	Transaction ID : D533396		
Purpose of Disbursement Travel - Lodging		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015		
Mailing Address 499 S Capitol St SW Ste 422			Amount of Each Disbursement this Period 1000.00		
City Washington	State DC	Zip Code 20003-4028	Transaction ID : D533314		
Purpose of Disbursement Bookkeeping		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015		
Mailing Address 499 S Capitol St SW Ste 422			Amount of Each Disbursement this Period 1000.00		
City Washington	State DC	Zip Code 20003-4028	Transaction ID : D533315		
Purpose of Disbursement Bookkeeping		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional)	2672.76
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00 Transaction ID : D533316
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00 Transaction ID : D533317
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00 Transaction ID : D533318
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00 Transaction ID : D533319
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 135.25 Transaction ID : D533325
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 109.85 Transaction ID : D533326
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4495.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 681.63 Transaction ID : D533327
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 597.87 Transaction ID : D533328
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 60.46 Transaction ID : D533329
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	681.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 6.86
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	Transaction ID : D533339
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 19.98
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : D533380
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 25.00
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Telephone	
Candidate Name	Category/Type	Transaction ID : D533386
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	51.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 499 S Capitol St SW Ste 422			Amount of Each Disbursement this Period 25.00
City Washington	State DC	Zip Code 20003-4028	
Purpose of Disbursement Telephone		Category/ Type	Transaction ID : D533387
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. James Beck			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 139 New Brooklyn			Amount of Each Disbursement this Period 360.40
City Sicklerville	State NJ	Zip Code 08081	
Purpose of Disbursement IT Services		Category/ Type	Transaction ID : D531247
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) C. BP			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 501 Westlake Park Boulevard			Amount of Each Disbursement this Period 32.30
City Houston	State TX	Zip Code 77079	
Purpose of Disbursement Automobile Expense		Category/ Type	Transaction ID : D531223
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	417.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. BP		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 501 Westlake Park Boulevard		Amount of Each Disbursement this Period 29.80
City Houston State TX Zip Code 77079	Purpose of Disbursement Automobile Expense	
Candidate Name		Transaction ID : D531213
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. BP		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 501 Westlake Park Boulevard		Amount of Each Disbursement this Period 28.90
City Houston State TX Zip Code 77079	Purpose of Disbursement Automobile Expense	
Candidate Name		Transaction ID : D531219
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. BP		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 501 Westlake Park Boulevard		Amount of Each Disbursement this Period 19.35
City Houston State TX Zip Code 77079	Purpose of Disbursement Automobile Expense	
Candidate Name		Transaction ID : D533310
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	78.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Bullfeathers		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address 410 First Street SE		Amount of Each Disbursement this Period 87.06
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Meals	Transaction ID : D533330
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. C9 Concepts		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 13050 Bustleton Ave. Suite G		Amount of Each Disbursement this Period 1250.00
City Philadelphia	State PA	
Zip Code 19116	Purpose of Disbursement Fundraising Fee	Transaction ID : D533320
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. C9 Concepts		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 13050 Bustleton Ave. Suite G		Amount of Each Disbursement this Period 625.00
City Philadelphia	State PA	
Zip Code 19116	Purpose of Disbursement Fundraising Fee	Transaction ID : D533321
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1962.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Capitol Host		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address PO Box 77896		Amount of Each Disbursement this Period 34.90
City Washington	State DC	
Zip Code 20013	Purpose of Disbursement Food and Meals	Transaction ID : D533331
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Host		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address PO Box 77896		Amount of Each Disbursement this Period 8.75
City Washington	State DC	
Zip Code 20013	Purpose of Disbursement Food and Meals	Transaction ID : D533332
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Comcast		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address PO Box 3002		Amount of Each Disbursement this Period 83.94
City Southeastern	State PA	
Zip Code 19398	Purpose of Disbursement Internet Service	Transaction ID : D533385
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	127.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address PO Box 3002		Amount of Each Disbursement this Period 153.26
City Southeastern	State PA	
Zip Code 19398	Purpose of Disbursement Internet	Transaction ID : D533426
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address PO Box 3002		Amount of Each Disbursement this Period 83.68
City Southeastern	State PA	
Zip Code 19398	Purpose of Disbursement Internet Service	Transaction ID : D531261
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. DoubleTree		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 7930 Jones Branch Dr #1100		Amount of Each Disbursement this Period 1047.23
City Mc Lean	State VA	
Zip Code 22102	Purpose of Disbursement Travel - Lodging	Transaction ID : D533397
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1284.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 104	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Michael Driscoll		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 9630 Milnore St		Amount of Each Disbursement this Period 500.00 Transaction ID : D532227
City Philadelphia	State PA Zip Code 19114	
Purpose of Disbursement Tickets for Fundraiser	Candidate Name	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Dunkin Donuts		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 110 E Street Rd		Amount of Each Disbursement this Period 4.12 Transaction ID : D533343
City Feasterville Trevoese	State PA Zip Code 19053-7604	
Purpose of Disbursement Food and Meals	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. E-Z Pass		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 7631 Derry Street		Amount of Each Disbursement this Period 70.00 Transaction ID : D532240
City Harrisburg	State PA Zip Code 17111	
Purpose of Disbursement Automobile Expense	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	574.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. E-Z Pass		Date of Disbursement
Mailing Address 7631 Derry Street		M M / D D / Y Y Y Y 11 / 24 / 2015
City Harrisburg	State PA	Zip Code 17111
Purpose of Disbursement Automobile Expense	Candidate Name	Amount of Each Disbursement this Period 70.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : D532236

Full Name (Last, First, Middle Initial) B. E-Z Pass		Date of Disbursement
Mailing Address 7631 Derry Street		M M / D D / Y Y Y Y 12 / 31 / 2015
City Harrisburg	State PA	Zip Code 17111
Purpose of Disbursement Automobile Expense	Candidate Name	Amount of Each Disbursement this Period 105.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : D533311

Full Name (Last, First, Middle Initial) C. E-Z Pass		Date of Disbursement
Mailing Address 7631 Derry Street		M M / D D / Y Y Y Y 11 / 13 / 2015
City Harrisburg	State PA	Zip Code 17111
Purpose of Disbursement Automobile Expense	Candidate Name	Amount of Each Disbursement this Period 70.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : D532231

SUBTOTAL of Disbursements This Page (optional).....	245.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. E-Z Pass		Date of Disbursement
Mailing Address 7631 Derry Street		M M / D D / Y Y Y Y 10 / 07 / 2015
City Harrisburg	State PA	Zip Code 17111
Purpose of Disbursement Automobile Expense	Candidate Name	Amount of Each Disbursement this Period 70.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : D531218

Full Name (Last, First, Middle Initial) B. E-Z Pass		Date of Disbursement
Mailing Address 7631 Derry Street		M M / D D / Y Y Y Y 10 / 13 / 2015
City Harrisburg	State PA	Zip Code 17111
Purpose of Disbursement Automobile Expense	Candidate Name	Amount of Each Disbursement this Period 70.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : D531221

Full Name (Last, First, Middle Initial) C. E-Z Pass		Date of Disbursement
Mailing Address 7631 Derry Street		M M / D D / Y Y Y Y 10 / 30 / 2015
City Harrisburg	State PA	Zip Code 17111
Purpose of Disbursement Automobile Expense	Candidate Name	Amount of Each Disbursement this Period 70.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : D531222

SUBTOTAL of Disbursements This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Echo Limousine		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 3821 N Narragansett Ave.		Amount of Each Disbursement this Period 90.00 Transaction ID : D531272
City Chicago	State IL Zip Code 60634	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Echo Limousine		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 3821 N Narragansett Ave.		Amount of Each Disbursement this Period 96.00 Transaction ID : D531275
City Chicago	State IL Zip Code 60634	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Echo Limousine		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 3821 N Narragansett Ave.		Amount of Each Disbursement this Period 246.00 Transaction ID : D531276
City Chicago	State IL Zip Code 60634	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	432.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. FirstData		M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Transaction ID : D531249	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. FirstData		M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Transaction ID : D531250	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. FirstData		M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Transaction ID : D531251	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	531.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. FirstData		M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Transaction ID : D533333	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. FirstData		M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Transaction ID : D533334	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. FirstData		M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Transaction ID : D533335	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	242.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. FirstData		M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Transaction ID : D533336	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. FirstData		M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Transaction ID : D533337	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. FirstData		M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Transaction ID : D533338	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	95.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address PO Box 542000		Amount of Each Disbursement this Period 569.00 Transaction ID : D531225
City Omaha	State NE Zip Code 68154-8000	
Purpose of Disbursement Automobile Lease	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address PO Box 542000		Amount of Each Disbursement this Period 569.00 Transaction ID : D533312
City Omaha	State NE Zip Code 68154-8000	
Purpose of Disbursement Automobile Lease	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address PO Box 542000		Amount of Each Disbursement this Period 569.00 Transaction ID : D533313
City Omaha	State NE Zip Code 68154-8000	
Purpose of Disbursement Automobile Lease	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1707.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Holocaust Awareness Museum			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 10100 Jamison Ave			Amount of Each Disbursement this Period 500.00 Transaction ID : D531211
City Philadelphia	State PA	Zip Code 19116	
Purpose of Disbursement Advertisement		Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. Hotels.com			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 5400 LBJ Freeway, Suite 500			Amount of Each Disbursement this Period 551.05 Transaction ID : D533395
City Dallas	State TX	Zip Code 75240	
Purpose of Disbursement Travel - Lodging		Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) c. Huntingdon Valley Country Club			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 2294 Country Club Drive			Amount of Each Disbursement this Period 500.00 Transaction ID : D531246
City Huntingdon Valley	State PA	Zip Code 19006	
Purpose of Disbursement Fundraising Event Expense		Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	1551.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Jetblue			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015		
Mailing Address 776 N Terminal Dr			Amount of Each Disbursement this Period 233.80		
City Salt Lake City	State UT	Zip Code 84116	Transaction ID : D531280		
Purpose of Disbursement Travel		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Jetblue			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015		
Mailing Address 776 N Terminal Dr			Amount of Each Disbursement this Period 233.80		
City Salt Lake City	State UT	Zip Code 84116	Transaction ID : D531281		
Purpose of Disbursement Travel		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Montgomery McCracken Walker & Rhoads LLP			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015		
Mailing Address 123 South Broad St 24th Floor			Amount of Each Disbursement this Period 178.50		
City Philadelphia	State PA	Zip Code 19109-1099	Transaction ID : D533322		
Purpose of Disbursement Legal Fees		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	646.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. National Association of Realtors			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 500 New Jersey Avenue			Amount of Each Disbursement this Period 300.00
City Washington	State DC	Zip Code 20001	Transaction ID : D531244
Purpose of Disbursement Fundraising Event Expense		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. NGP VAN Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1101 15th St. NW			Amount of Each Disbursement this Period 700.00
City Washington	State DC	Zip Code 20005	Transaction ID : D531263
Purpose of Disbursement Software		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. NGP VAN Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1101 15th St. NW			Amount of Each Disbursement this Period 700.00
City Washington	State DC	Zip Code 20005	Transaction ID : D533390
Purpose of Disbursement Software		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 104		
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. NGP VAN Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 1101 15th St. NW		Amount of Each Disbursement this Period 700.00 Transaction ID : D533391
City Washington State DC Zip Code 20005	Purpose of Disbursement Software	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. North Penn Democratic Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address 620 S. Cannon Ave.		Amount of Each Disbursement this Period 250.00 Transaction ID : D531239
City Lansdale State PA Zip Code 19446	Purpose of Disbursement Nonfederal Political Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 62.50 Transaction ID : D531262
City Rochester State NY Zip Code 14625-2311	Purpose of Disbursement Payroll Expense	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1012.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 54.00 Transaction ID : D533388
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll Expense		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 54.00 Transaction ID : D533389
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll Expense		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. Southwest Airlines			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address P.O. Box 36647-1CR			Amount of Each Disbursement this Period 12.50 Transaction ID : D531282
City Dallas	State TX	Zip Code 75235	
Purpose of Disbursement Travel		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	120.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Southwest Airlines			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address P.O. Box 36647-1CR			Amount of Each Disbursement this Period 12.50 Transaction ID : D531283
City Dallas	State TX	Zip Code 75235	
Purpose of Disbursement Travel		Category/ Type	
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. Southwest Airlines			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address P.O. Box 36647-1CR			Amount of Each Disbursement this Period 217.96 Transaction ID : D531284
City Dallas	State TX	Zip Code 75235	
Purpose of Disbursement Travel		Category/ Type	
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) C. Southwest Airlines			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address P.O. Box 36647-1CR			Amount of Each Disbursement this Period 12.50 Transaction ID : D531285
City Dallas	State TX	Zip Code 75235	
Purpose of Disbursement Travel		Category/ Type	
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	242.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 12.50
City Dallas State TX Zip Code 75235	Category/ Type	
Purpose of Disbursement Travel		Transaction ID : D531286
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 217.96
City Dallas State TX Zip Code 75235	Category/ Type	
Purpose of Disbursement Travel		Transaction ID : D531287
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address P.O. Box 321		Amount of Each Disbursement this Period 3.55
City Essington State PA Zip Code 19029	Category/ Type	
Purpose of Disbursement Automobile Expense		Transaction ID : D532237
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	234.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address P.O. Box 321		Amount of Each Disbursement this Period 25.69
City Essington	State PA	
Zip Code 19029	Purpose of Disbursement Automobile Expense	Transaction ID : D532238
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address P.O. Box 321		Amount of Each Disbursement this Period 3.17
City Essington	State PA	
Zip Code 19029	Purpose of Disbursement Automobile Expense	Transaction ID : D532228
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address P.O. Box 321		Amount of Each Disbursement this Period 18.53
City Essington	State PA	
Zip Code 19029	Purpose of Disbursement Automobile Expense	Transaction ID : D531217
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	47.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. The Congressional Club			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 2001 New Hampshire Ave NW			Amount of Each Disbursement this Period 150.00 Transaction ID : D531248
City Washington	State DC	Zip Code 20009	
Purpose of Disbursement Membership Fee		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. The Ritz Carlton, Chicago			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 160 E Pearson St.			Amount of Each Disbursement this Period 442.99 Transaction ID : D531273
City Chicago	State IL	Zip Code 60611	
Purpose of Disbursement Travel - Lodging		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) c. The Ritz Carlton, Chicago			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 160 E Pearson St.			Amount of Each Disbursement this Period 4.54 Transaction ID : D531274
City Chicago	State IL	Zip Code 60611	
Purpose of Disbursement Travel - Lodging		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	597.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Twins Auto Body			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015		
Mailing Address 7931 Oxford Ave			Amount of Each Disbursement this Period 1121.26		
City Philadelphia	State PA	Zip Code 19111	Transaction ID : D532232		
Purpose of Disbursement Automobile Expense		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015		
Mailing Address 10000 Roosevelt Blvd #4			Amount of Each Disbursement this Period 191.77		
City Philadelphia	State PA	Zip Code 19116	Transaction ID : D531259		
Purpose of Disbursement Telephone		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015		
Mailing Address 10000 Roosevelt Blvd #4			Amount of Each Disbursement this Period 187.03		
City Philadelphia	State PA	Zip Code 19116	Transaction ID : D533381		
Purpose of Disbursement Telephone		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	1500.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 10000 Roosevelt Blvd #4		Amount of Each Disbursement this Period 129.96 Transaction ID : D533382
City Philadelphia State PA Zip Code 19116	Purpose of Disbursement Telephone Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 10000 Roosevelt Blvd #4		Amount of Each Disbursement this Period 45.00 Transaction ID : D533383
City Philadelphia State PA Zip Code 19116	Purpose of Disbursement Telephone Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 10000 Roosevelt Blvd #4		Amount of Each Disbursement this Period 139.53 Transaction ID : D533384
City Philadelphia State PA Zip Code 19116	Purpose of Disbursement Telephone Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	314.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial)
A. Wawa

Mailing Address Red Roof, 260 W. Baltimore Pike

City Media State PA Zip Code 19063

Purpose of Disbursement Automobile Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 06 / 2015

Amount of Each Disbursement this Period: 3.51

Transaction ID : D531216

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

Mailing Address Red Roof, 260 W. Baltimore Pike

City Media State PA Zip Code 19063

Purpose of Disbursement Automobile Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 13 / 2015

Amount of Each Disbursement this Period: 7.08

Transaction ID : D531220

Full Name (Last, First, Middle Initial)
c. Wawa

Mailing Address Red Roof, 260 W. Baltimore Pike

City Media State PA Zip Code 19063

Purpose of Disbursement Travel - Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 17 / 2015

Amount of Each Disbursement this Period: 3.28

Transaction ID : D532233

SUBTOTAL of Disbursements This Page (optional) 13.87

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Wawa		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address Red Roof, 260 W. Baltimore Pike		Amount of Each Disbursement this Period 26.65
City Media	State PA	
Purpose of Disbursement Automobile Expense	Category/ Type	
Candidate Name	Transaction ID : D532234	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Wawa		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2015
Mailing Address Red Roof, 260 W. Baltimore Pike		Amount of Each Disbursement this Period 25.28
City Media	State PA	
Purpose of Disbursement Automobile Expense	Category/ Type	
Candidate Name	Transaction ID : D532235	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Wells Fargo Bank, NA		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 12.00
City Portland	State OR	
Purpose of Disbursement Bank fee	Category/ Type	
Candidate Name	Transaction ID : D533340	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	63.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank, NA		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 200.00 Transaction ID : D533341
City Portland	State OR	
Zip Code 97228-6995	Purpose of Disbursement Bank fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Wells Fargo Bank, NA		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 3.00 Transaction ID : D533342
City Portland	State OR	
Zip Code 97228-6995	Purpose of Disbursement Bank fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Westin Hotels		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address One StarPoint		Amount of Each Disbursement this Period 213.75 Transaction ID : D533398
City Stamford	State CT	
Zip Code 06902	Purpose of Disbursement Travel - Lodging	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	416.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Rep Brendan Boyle		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 15040 Kelvin Ave.		Amount of Each Disbursement this Period 632.81 Transaction ID : D533400
City Philadelphia	State PA	
Purpose of Disbursement Reimbursement - Travel Expense		Category/ Type
Candidate Name Rep Brendan Boyle		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2016	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: PA	District: 13	

Full Name (Last, First, Middle Initial) B. Willard Intercontinental		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 1401 Pennsylvania Avenue, NW		Amount of Each Disbursement this Period 632.81 Transaction ID : D533460 [MEMO ITEM]
City Washington	State DC	
Purpose of Disbursement Travel Expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House	Disbursement For: 2016	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State:	District:	

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

SUBTOTAL of Disbursements This Page (optional).....	632.81
TOTAL This Period (last page this line number only).....	54576.16

**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 104			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Imri Eisner		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address 325 N End Ave		Amount of Each Disbursement this Period 10.00
City New York State NY Zip Code 10282-1026	Category/Type	
Purpose of Disbursement Refund of Contribution		Transaction ID : D532226
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	10.00
TOTAL This Period (last page this line number only).....	10.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Abington Police Athletic League		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address 1166 Old York Rd		Amount of Each Disbursement this Period 300.00 Transaction ID : D531237
City Abington	State PA Zip Code 19001	
Purpose of Disbursement Donation	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 430 S Capitol Street, SE		Amount of Each Disbursement this Period 5000.00 Transaction ID : D531240
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Federal Contribution	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Eisenberg for Judge		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 50 Monument Road Suite 101		Amount of Each Disbursement this Period 500.00 Transaction ID : D531234
City Bala Cynwyd	State PA Zip Code 19004	
Purpose of Disbursement Nonfederal Political Contribution	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 104			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Friends of Kevin Boyle		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 8035 Burholme Ave		Amount of Each Disbursement this Period 2500.00 Transaction ID : D531241
City Philadelphia	State PA Zip Code 19111-1862	
Purpose of Disbursement Nonfederal Political Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Friends of Kevin Boyle		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 8035 Burholme Ave		Amount of Each Disbursement this Period 25000.00 Transaction ID : D533324
City Philadelphia	State PA Zip Code 19111-1862	
Purpose of Disbursement Nonfederal Political Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Friends of Mark Levy		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address PO Box 176		Amount of Each Disbursement this Period 1000.00 Transaction ID : D531230
City Norristown	State PA Zip Code 19404-0176	
Purpose of Disbursement Nonfederal Political Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	28500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 104	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Kevin Dougherty for Pennsylvania		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 8566 Bustleton Avenue		Amount of Each Disbursement this Period 5000.00 Transaction ID : D531231
City Philadelphia State PA Zip Code 19152	Purpose of Disbursement Nonfederal Political Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MARK TAKAI FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address PO BOX 2267		Amount of Each Disbursement this Period 500.00 Transaction ID : D533323
City PEARL CITY State HI Zip Code 96782	Purpose of Disbursement Political Contribution	
Candidate Name KYLE MARK TAKAI	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: HI District: 01		

Full Name (Last, First, Middle Initial) c. Springfield Democratic Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address 276 Orchard Road		Amount of Each Disbursement this Period 250.00 Transaction ID : D531238
City Springfield State PA Zip Code 19064	Purpose of Disbursement Nonfederal Political Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 104	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Upper Merion Democratic Committee			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015	
Mailing Address 123 E Valley Forge Road			Amount of Each Disbursement this Period 250.00	
City King of Prussia	State PA	Zip Code 19406	Transaction ID : D531235	
Purpose of Disbursement Nonfederal Political Contribution		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____ District: _____				

Full Name (Last, First, Middle Initial) B. Upper Moreland Democrats			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015	
Mailing Address PO Box 857			Amount of Each Disbursement this Period 500.00	
City Norristown	State PA	Zip Code 19404	Transaction ID : D531236	
Purpose of Disbursement Nonfederal Political Contribution		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____ District: _____				

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

SUBTOTAL of Disbursements This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	40800.00