

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

Stephen Lynch for Congress

ADDRESS (number and street)

169 W 8th St



☐

Check if different than previously reported. (ACC)

South Boston

MA

02127

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00366948

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

STATE ▼ DISTRICT

MA

08

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M / D D / Y Y Y Y

11 / 05 / 2024

in the State of

MA

5. Covering Period

M M / D D / Y Y Y Y

10 / 17 / 2024

through

M M / D D / Y Y Y Y

11 / 25 / 2024

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

Conroy, Nancy, , ,

Signature of Treasurer

Conroy, Nancy, , ,

Date

M M / D D / Y Y Y Y

12 / 05 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only

FEC FORM 3  
(Revised 05/2016)

SUMMARY PAGE  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Stephen Lynch for Congress

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

|                                                                                                           | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|-----------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....                                      | 33620.00                | 757261.06                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                 | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                     | 33620.00                | 757261.06                          |
| 7. Net Operating Expenditures                                                                             |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                  | 22703.86                | 778671.18                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                       | 0.00                    | 200.00                             |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                               | 22703.86                | 778471.18                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                      | 1091789.42              |                                    |
| 9. Debts and Obligations Owed TO<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 1750.00                 |                                    |
| 10. Debts and Obligations Owed BY<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                    |

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Stephen Lynch for Congress

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

I. RECEIPTS

| COLUMN A<br>Total this Period                              | COLUMN B<br>Election Cycle Total as of<br>11 / 05 / 2024<br>(date of general election) | COLUMN C<br>Total for<br>11 / 06 / 2024<br>(date after general election)<br><br>through<br>11 / 25 / 2024<br>(last day of reporting period) |
|------------------------------------------------------------|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| 11. CONTRIBUTIONS<br>(other than loans) FROM:              |                                                                                        |                                                                                                                                             |
| (a) Individuals/Persons Other than<br>Political Committees |                                                                                        |                                                                                                                                             |
| (i) Itemized (use Schedule A)                              |                                                                                        |                                                                                                                                             |
| 4600.00                                                    | 346120.00                                                                              | 0.00                                                                                                                                        |
| (ii) Unitemized                                            |                                                                                        |                                                                                                                                             |
| 20.00                                                      | 3641.06                                                                                | 10.00                                                                                                                                       |
| (iii) Total of contributions from individuals              |                                                                                        |                                                                                                                                             |
| 4620.00                                                    | 349761.06                                                                              | 10.00                                                                                                                                       |
| (b) Political Party Committees                             |                                                                                        |                                                                                                                                             |
| 0.00                                                       | 0.00                                                                                   | 0.00                                                                                                                                        |
| (c) Other Political Committees                             |                                                                                        |                                                                                                                                             |
| 29000.00                                                   | 407500.00                                                                              | 0.00                                                                                                                                        |

**POST-ELECTION DETAILED SUMMARY PAGE**

## Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

| <b>COLUMN A</b><br><b>Total this Period</b>                                         | <b>COLUMN B</b><br><b>Election Cycle Total as of *</b><br>(date of general election)<br>(* See page 5 for date) | <b>COLUMN C</b><br><b>Total for *</b> (date after general election)<br><b>through *</b> (last day of reporting period)<br>(* See page 5 for dates) |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| (d) The Candidate                                                                   |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) |                                                                                                                 |                                                                                                                                                    |
| 33620.00                                                                            | 757261.06                                                                                                       | 10.00                                                                                                                                              |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES                                      |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| 13. LOANS:                                                                          |                                                                                                                 |                                                                                                                                                    |
| (a) Made or Guaranteed by the Candidate                                             |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (b) All Other Loans                                                                 |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b))                                           |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)                      |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 200.00                                                                                                          | 0.00                                                                                                                                               |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)                                      |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 19248.66                                                                                                        | 0.00                                                                                                                                               |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)                                |                                                                                                                 |                                                                                                                                                    |
| 33620.00                                                                            | 776709.72                                                                                                       | 10.00                                                                                                                                              |

POST-ELECTION DETAILED SUMMARY PAGE  
Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Stephen Lynch for Congress

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

II. DISBURSEMENTS

| COLUMN A<br>Total this Period                           | COLUMN B<br>Election Cycle Total as of *<br>(date of general election)<br>(* See page 5 for date) | COLUMN C<br>Total for * (date after general election)<br>through * (last day of reporting period)<br>(* See page 5 for dates) |
|---------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| 17. OPERATING EXPENDITURES                              |                                                                                                   |                                                                                                                               |
| 22703.86                                                | 778671.18                                                                                         | 8649.77                                                                                                                       |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES            |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| 19. LOAN REPAYMENTS:                                    |                                                                                                   |                                                                                                                               |
| (a) Of Loans Made or Guaranteed by the Candidate        |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| (b) Of All Other Loans                                  |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))   |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| 20. REFUNDS OF CONTRIBUTIONS TO:                        |                                                                                                   |                                                                                                                               |
| (a) Individuals/Persons Other Than Political Committees |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| (b) Political Party Committees                          |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

| COLUMN A<br>Total this Period | COLUMN B<br>Election Cycle Total as of *<br>(date of general election)<br>(* See page 5 for date) | COLUMN C<br>Total for * (date after general election)<br>through * (last day of reporting period)<br>(* See page 5 for dates) |
|-------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
|-------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|

(c) Other Political Committees (such as PACs)

|      |      |      |
|------|------|------|
| 0.00 | 0.00 | 0.00 |
|------|------|------|

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

|      |      |      |
|------|------|------|
| 0.00 | 0.00 | 0.00 |
|------|------|------|

21. OTHER DISBURSEMENTS

|         |           |         |
|---------|-----------|---------|
| 2000.00 | 199000.00 | 2000.00 |
|---------|-----------|---------|

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

|          |           |          |
|----------|-----------|----------|
| 24703.86 | 977671.18 | 10649.77 |
|----------|-----------|----------|

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

|          |           |       |
|----------|-----------|-------|
| 33620.00 | 757261.06 | 10.00 |
|----------|-----------|-------|

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

|          |           |         |
|----------|-----------|---------|
| 22703.86 | 778471.18 | 8649.77 |
|----------|-----------|---------|

V. CASH SUMMARY

|                                                                               |            |
|-------------------------------------------------------------------------------|------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....                       | 1082873.28 |
| 24. TOTAL RECIEPTS THIS PERIOD (from Line 16) .....                           | 33620.00   |
| 25. SUBTOTAL (add Line 23 and Line 24) .....                                  | 1116493.28 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....                      | 24703.86   |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) | 1091789.42 |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 23

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

Anderson, Brian, F, ,

A. Mailing Address 472 Summer St

City

Westwood

State

MA

Zip Code

02090-1000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RISE

Occupation

Real Estate

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

Transaction ID : 12071326

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Callahan, Patrick, J, ,

B. Mailing Address 44 Summit Ln

City

East Falmouth

State

MA

Zip Code

02536-7901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Callahan, Inc.

Occupation

Builder

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

Transaction ID : 12071338

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Callahan, Stephen, R, ,

C. Mailing Address 57 Stone Meadow Ln

City

Hanover

State

MA

Zip Code

02339-3501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Callahan, Inc.

Occupation

Construction Manager

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

Transaction ID : 12071323

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

2250.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 23

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

Callahan, Timothy, J, ,

A.

Mailing Address 25 Highwood Ln

City

East Falmouth

State

MA

Zip Code

02536-7913

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Callahan, Inc.

Occupation

General Contractor

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 23 |   |   | 2024 |   |   |   |

Transaction ID : 12071332

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Cook, Peter, A., , Sr.

Mailing Address 737 Webster St

City

Marshfield

State

MA

Zip Code

02050-4952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cook &amp; Company Insurance Services, Inc

Occupation

President

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 23 |   |   | 2024 |   |   |   |

Transaction ID : 12071340

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Obrien, Gerard, , ,

Mailing Address 65 Redgate Rd

City

West Roxbury

State

MA

Zip Code

02132-3438

FEC ID number of contributing  
federal political committee.

C

Name of Employer

William J. O'Brien Ins. Agcy. Inc

Occupation

Insurance Broker

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 04 |   |   | 2024 |   |   |   |

Transaction ID : 12190117

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

2250.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 23

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

Williams, Tim, , ,

A.

Mailing Address 45 Adrian Way

City

Barnstable

State

MA

Zip Code

02630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tim Williams

Occupation

Builder

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1200.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 7 |   | 2 | 0 | 2 | 4 |

Transaction ID : 12067542

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

B.

Full Name (Last, First, Middle Initial)

ActBlue Technical Services

Mailing Address 366 Summer St

City

Somerville

State

MA

Zip Code

02144-3132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1120.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 7 |   | 2 | 0 | 2 | 4 |

Transaction ID : 12067542E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

☐ Memo Item

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

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

100.00

4600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 23

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF PEDIATRIC DENTISTRY POLITICAL ACTION COMMITTEE

A.

Mailing Address 211 E Chicago Ave

Ste 1600

City

Chicago

State

IL

Zip Code

60611-2658

FEC ID number of contributing  
federal political committee.

C C00365965

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 04 2024

Transaction ID : 12187664

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

B.

Full Name (Last, First, Middle Initial)

ActBlue Technical Services

Mailing Address 366 Summer St

City

Somerville

State

MA

Zip Code

02144-3132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 05 2024

Transaction ID : 12187664E

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

C.

Full Name (Last, First, Middle Initial)

AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1015 15th St NW

Ste 802

City

Washington

State

DC

Zip Code

20005-2605

FEC ID number of contributing  
federal political committee.

C C00010868

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 04 2024

Transaction ID : 12244117

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

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

6000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 23

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

BUILD POLITICAL ACTION COMMITTEE

A.

Mailing Address 1201 15th St NW

City

Washington

State

DC

Zip Code

20005-2899

FEC ID number of contributing  
federal political committee.

C C00000901

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2024

Transaction ID : 12193904

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

DEMOCRACY SUMMER LEADERSHIP PAC

Mailing Address 600 Pennsylvania Ave SE  
Unit 15180

City

Washington

State

DC

Zip Code

20003-7508

FEC ID number of contributing  
federal political committee.

C C00664318

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2024

Transaction ID : 12153167

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

EMPLOYEES OF RTX CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1000 Wilson Blvd  
Ste 2300

City

Arlington

State

VA

Zip Code

22209-3927

FEC ID number of contributing  
federal political committee.

C C00097568

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2024

Transaction ID : 12187650

Amount of Each Receipt this Period

4000.00

☐ Memo Item

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

6000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 23

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

A.

Mailing Address 11011 Sunset Hills Rd

City  
RestonState  
VAZip Code  
20190-5311FEC ID number of contributing  
federal political committee.

C C00078451

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 04 2024

Transaction ID : 12153173

Amount of Each Receipt this Period

3000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

INTERNATIONAL ASSOCIATION OF SHEET METAL, AIR, RAIL AND TRANSPORTATION WORKERS POLITICAL ACTION LEAGUE

Mailing Address 1750 New York Ave NW  
FI 6City  
WashingtonState  
DCZip Code  
20006-5301FEC ID number of contributing  
federal political committee.

C C00007542

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 04 2024

Transaction ID : 12190119

Amount of Each Receipt this Period

5000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Machinists Non-Partisan Political League

Mailing Address 9000 Machinists Pl

City  
Upper MarlboroState  
MDZip Code  
20772-2675FEC ID number of contributing  
federal political committee.

C C00002469

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 04 2024

Transaction ID : 12218879

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

13000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 23

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

NATIONAL AIR TRAFFIC CONTROLLERS, PAC

A.

Mailing Address 1325 Massachusetts Ave NW

City

Washington

State

DC

Zip Code

20005-4171

FEC ID number of contributing  
federal political committee.

C C00238725

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 23 2024

Transaction ID : 12071341

Amount of Each Receipt this Period

1500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1 Constitution Ave NE  
Ste 300

City

Washington

State

DC

Zip Code

20002-5618

FEC ID number of contributing  
federal political committee.

C C00009282

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 29 2024

Transaction ID : 12127129

Amount of Each Receipt this Period

2500.00

☐ 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  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

4000.00

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

29000.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 23

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fee

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:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3.95

Transaction ID : 501218466

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
credit card processing fee

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:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 3 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.40

Transaction ID : 501218467

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
credit card processing fee

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:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

39.50

Transaction ID : 501218468

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

43.85

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 23

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City  
NewarkState  
NJZip Code  
07101-1270Purpose of Disbursement  
credit card payment

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3121.72

Transaction ID : 501211705

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Alba Restaurant**

Mailing Address 1486 Hancock St

City  
QuincyState  
MAZip Code  
02169-5203Purpose of Disbursement  
Fundraiser Catering

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1535.76

Transaction ID : 501211806

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Amazon Marketplace**Mailing Address 1200 12th Ave S  
Ste 1200City  
SeattleState  
WAZip Code  
98144-2734Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 9 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6.26

Transaction ID : 501211805

☒ Memo Item \***SUBTOTAL** of Disbursements This Page (optional).....▶

3121.72

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 23

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Anton's**

Mailing Address 116 W Broadway

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 18  |   | 2024    |

City  
BostonState  
MAZip Code  
02127-1072

FEC Identification Number

C

Purpose of Disbursement  
Event expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

113.50

Transaction ID : 501211797

☒ Memo Item \*

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Boston Globe**

Mailing Address PO Box 55819

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 25  |   | 2024    |

City  
BostonState  
MAZip Code  
02205-5819

FEC Identification Number

C

Purpose of Disbursement  
Subscription

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

168.00

Transaction ID : 501211801

☒ Memo Item \*

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Castle Self Storage**

Mailing Address 39 Old Colony Ave

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 15  |   | 2024    |

City  
South BostonState  
MAZip Code  
02127-2404

FEC Identification Number

C

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

433.00

Transaction ID : 501211807

☒ Memo Item \*

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State:

District:

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

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 23

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Emerson Auto Service Corporation**

Mailing Address 420 E 3rd St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 08  |   | 2024    |

City  
South BostonState  
MAZip Code  
02127-1461

FEC Identification Number

C

Purpose of Disbursement  
Auto expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

399.16

Transaction ID : 501211804

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Google.Inc.**

Mailing Address 1600 Amphitheatre Pkwy

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 01  |   | 2024    |

City  
Mountain ViewState  
CAZip Code  
94043-1351

FEC Identification Number

C

Purpose of Disbursement  
Google suite subscription

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

38.25

Transaction ID : 501211802

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Speedway**

Mailing Address 874 Dorchester Ave

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 22  |   | 2024    |

City  
BostonState  
MAZip Code  
02125-1117

FEC Identification Number

C

Purpose of Disbursement  
Auto expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

60.03

Transaction ID : 501211799

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

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

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 23

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Speedway**

Mailing Address 874 Dorchester Ave

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 07  |   | 2024    |

City  
BostonState  
MAZip Code  
02125-1117

FEC Identification Number

C

Purpose of Disbursement  
Auto expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

69.51

Transaction ID : 501211803

☒ Memo Item \*

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Stapleton Floral**

Mailing Address 635 E Broadway

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 17  |   | 2024    |

City  
South BostonState  
MAZip Code  
02127-1503

FEC Identification Number

C

Purpose of Disbursement  
Flowers

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.94

Transaction ID : 501211796

☒ Memo Item \*

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Stapleton Floral**

Mailing Address 635 E Broadway

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 25  |   | 2024    |

City  
South BostonState  
MAZip Code  
02127-1503

FEC Identification Number

C

Purpose of Disbursement  
Flowers

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

277.63

Transaction ID : 501211800

☒ Memo Item \*

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State:

District:

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

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 23

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Chick Montana Group**

Mailing Address 202 Bonham Rd

City  
DedhamState  
MAZip Code  
02026-5404Purpose of Disbursement  
Postage and delivery expense

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.24

Transaction ID : 501218470

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chick Montana Group**

Mailing Address 202 Bonham Rd

City  
DedhamState  
MAZip Code  
02026-5404Purpose of Disbursement  
Accounting and compliance services

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : 501218471

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Chris Trull**Mailing Address 70 I St SE  
Apt 426City  
WashingtonState  
DCZip Code  
20003-4815Purpose of Disbursement  
Fundraising consulting

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : 501218472

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6510.24

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 23

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Chris Trull**Mailing Address 70 I St SE  
Apt 426City  
WashingtonState  
DCZip Code  
20003-4815Purpose of Disbursement  
Fundraising consulting

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : 501218473

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CinCon Group**

Mailing Address 23 Cresthill Rd

City  
BrightonState  
MAZip Code  
02135-1826Purpose of Disbursement  
Strategic Consulting

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : 501218474

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Gavin Foundation**

Mailing Address 675 E 4th St

City  
South BostonState  
MAZip Code  
02127-3063Purpose of Disbursement  
Charitable contribution

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 9 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : 501218476

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 23

|                                               |                              |                              |                              |
|-----------------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a                  | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. KC Strategies**

Mailing Address 4 Charlotte Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 05  |   | 2024    |

City  
AndoverState  
MAZip Code  
01810-6002

FEC Identification Number

C

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

5500.00

Transaction ID : 501218477

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. South Boston Community Health Center**

Mailing Address 409 W Broadway

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 29  |   | 2024    |

City  
South BostonState  
MAZip Code  
02127-2245

FEC Identification Number

C

Purpose of Disbursement  
Charitable contribution

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : 501218478

☐ Memo Item

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.**

Mailing Address

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

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).....▶

6500.00

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

22675.81

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 23

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. MASSACHUSETTS DEMOCRATIC STATE COMMITTEE**Mailing Address 11 Beacon St  
Ste 410City  
BostonState  
MAZip Code  
02108-3055Purpose of Disbursement  
Federal Contribution

011

Candidate Name  
MASSACHUSETTS DEMOCRATIC STATE COMMITTEECategory/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C C00089243

Amount of Each Disbursement this Period

2000.00

Transaction ID : 501218182

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2000.00

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

2000.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 23 OF 23

FOR LINE NUMBER:  
(check only one)☒ 9  
☐ 10

NAME OF COMMITTEE (In Full)

**Stephen Lynch for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Verizon Political Accounts

Nature of Debt (Purpose):

Deposit

Mailing Address 5 Davis Farm Rd

City  
PortlandState  
MEZip Code  
04103-1669

Outstanding Balance Beginning This Period

1400.00

Transaction ID : 1250000428

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Verizon Political Accounts

Nature of Debt (Purpose):

Deposit

Mailing Address 5 Davis Farm Rd

City  
PortlandState  
MEZip Code  
04103-1669

Outstanding Balance Beginning This Period

350.00

Transaction ID : 1250000427

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

350.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

1750.00

2) **TOTALS** This Period (last page this line number only) ▶

1750.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

1750.00