

# 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  
Engel for Congress

ADDRESS (number and street) 462 California Road  
 Check if different than previously reported. (ACC) Bronxville NY 10708-2306

2. **FEC IDENTIFICATION NUMBER** ▼ C00236513 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT  
NY 16

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

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

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
04 / 01 / 2015 through 06 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Arnold Linhardt  
Signature of Treasurer Arnold Linhardt [Electronically Filed] Date M M / D D / Y Y Y Y  
07 / 15 / 2015

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Engel for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	170135.00	238085.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	170135.00	238085.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	88562.24	251716.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	88562.24	251716.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	295674.58	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Engel for Congress**

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).....	107660.00	152060.00
(ii) Unitemized.....	725.00	775.00
(iii) TOTAL of contributions from individuals ▶	108385.00	152835.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	61750.00	85250.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	170135.00	238085.00
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.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	170135.00	238085.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	88562.24	251716.98
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	18150.00	45162.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	106712.24	296878.98

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	232251.82
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	170135.00
25. SUBTOTAL (add Line 23 and Line 24).....	402386.82
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	106712.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	295674.58

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

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

FOR LINE NUMBER: PAGE 5 OF 115  
(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)  
**Engel for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nola Geffner-Mihlstein**

Mailing Address 2208 Walnut Avenue

City Manhattan Beach State CA Zip Code 90266-2845

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

Name of Employer Self 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  
 06 / 09 / 2015

**Transaction ID : AD011A05B810F4D2AB96**

Amount of Each Receipt this Period  
 625.00

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

Mailing Address 4601 Pnc D Leon Blvd Suite 300

City Coral Gables State FL Zip Code 33146-2112

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

Name of Employer Capital City 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  
 04 / 29 / 2015

**Transaction ID : A791E0526CBAF4E578FE**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1170 B East Hallandale Beach Blvd

City Hallandale Beach State FL Zip Code 33009-4437

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

Name of Employer Israel Bonds Occupation Board of Directors

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 29 / 2015

**Transaction ID : A58648C607F424248AE1**

Amount of Each Receipt this Period  
 1000.00

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

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

2625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Fred Saul Hoffman**

Mailing Address 341 Vizcaya Dr

City State Zip Code  
Palm Beach Gardens FL 33418-1730

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 Y  
05 / 25 / 2015

**Transaction ID : A265FEA80DD3342959EA**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4565 Barclay Fair Way

City State Zip Code  
Lake Worth FL 33449-8113

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 Y  
04 / 29 / 2015

**Transaction ID : A6ECD0B59B7CE42CF924**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 14 Colonial

City State Zip Code  
Irvine CA 92620-2519

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

Name of Employer Occupation  
Century 21 Award Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 25 / 2015

**Transaction ID : AC82331EA81074571A97**

Amount of Each Receipt this Period  
700.00

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

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

1700.00

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

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

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

Mailing Address 10921 NW 3rd St

City State Zip Code  
Plantation FL 33324-1539

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

Name of Employer Occupation  
BAYSHORE FORD TRUCK SALES NEW & USED TRUCK DEALER

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  
04 / 16 / 2015

**Transaction ID : A84F3CC729F9B48A6A16**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1604 Goodman Avenue

City State Zip Code  
Redondo Beach CA 90278-2719

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

Name of Employer Occupation  
Gibson Dunn Attorney

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  
06 / 04 / 2015

**Transaction ID : A79071550F407436E85C**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1187 Rodeo Drive

City State Zip Code  
Los Angeles CA 90035-1115

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

Name of Employer Occupation  
Self Physician

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  
06 / 03 / 2015

**Transaction ID : A815DC36545A1427CA5E**

Amount of Each Receipt this Period  
250.00

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

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

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

Mailing Address 9200 Sunset Boulevard #555

City West Hollywood	State CA	Zip Code 90069-3611
------------------------	-------------	------------------------

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

Name of Employer Mani Brothers	Occupation Real Estate Management
-----------------------------------	--------------------------------------

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  
 06 / 03 / 2015

**Transaction ID : ACDF24A480C6942FAB6B**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 102 N. Alta Vista Blvd.

City Los Angeles	State CA	Zip Code 90036-2826
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation 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 Y  
 06 / 05 / 2015

**Transaction ID : A2FAA550FC6E940BA851**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 3141 Ocana Avenue

City Long Beach	State CA	Zip Code 90808-3715
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation 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 Y  
 05 / 29 / 2015

**Transaction ID : A9A32DD87FE9846A0842**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Murat M Guzel**

Mailing Address 52 East Union Blvd.

City State Zip Code  
Bethlehem PA 18018-4079

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

Name of Employer Occupation  
NFS inc CEO

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  
06 / 01 / 2015

**Transaction ID : A75B69C422FEB4271A06**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 7572 Hawk's Landing Drive

City State Zip Code  
West Palm Beach FL 33412-3108

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 Y  
05 / 25 / 2015

**Transaction ID : A64BC8A7DC3FA4A948B5**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1130 Connecticut Ave NW

City State Zip Code  
Washington DC 20036-3904

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

Name of Employer Occupation  
MELTZ COMMUNICATIONS LLC Owner

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  
05 / 27 / 2015

**Transaction ID : A7CBE61FE54504CF8A62**

Amount of Each Receipt this Period  
1000.00

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 10 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 15220 Palmwood Rd

City State Zip Code  
Palm Beach Gardens FL 33410-1028

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

Name of Employer Occupation  
Convill Recreation Inc Business Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2015

**Transaction ID : AED8C12689F7F4BBEBF7**

Amount of Each Receipt this Period  
900.00

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

Mailing Address 1732 Aviation Blvd.

City State Zip Code  
Redondo Beach CA 90278-2810

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

Name of Employer Occupation  
HNB Capital Managing Member

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
625.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2015

**Transaction ID : AB936DAF402A8484A853**

Amount of Each Receipt this Period  
625.00

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

Mailing Address 185 Pinewood Road

City State Zip Code  
Hartsdale NY 10530-1401

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

Name of Employer Occupation  
LB Electric Engineer

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  
 05 / 26 / 2015

**Transaction ID : A4AC7E1B028794EC9A8C**

Amount of Each Receipt this Period  
1000.00

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

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

2525.00

**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 115  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

Mailing Address 1333 New Hampshire Ave NW

City Washington State DC Zip Code 20036-1500

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

Name of Employer Akin Gump Occupation Legal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2015

**Transaction ID : AB9C1B5A65E9D4606B61**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 25 Village Way

City Irvine State CA Zip Code 92603-0217

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

Name of Employer OC Dental Corp. 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  
 05 / 27 / 2015

**Transaction ID : A6A768720E2234FA7A8D**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 333 S. Grand Avenue

City Los Angeles State CA Zip Code 90071-1504

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

Name of Employer Gibson Dunn 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  
 06 / 04 / 2015

**Transaction ID : A69C0E968302B4487B57**

Amount of Each Receipt this Period  
 625.00

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

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

2375.00

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

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

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Jack M. Nagel**

Mailing Address 6222 Wilshire Blvd #400

City Los Angeles State CA Zip Code 90048-5100

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

Name of Employer Decron Properties Occupation Chairman

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015

**Transaction ID : A8B52DA893FC14A94B58**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 8332 Man O War Rd

City Palm Beach Gardens State FL Zip Code 33418-7719

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2015

**Transaction ID : A79A90448411245E3AD4**

Amount of Each Receipt this Period  
 360.00

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

Mailing Address 1148 Beverwil Drive

City Los Angeles State CA Zip Code 90035-1106

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

Name of Employer Self 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  
 06 / 03 / 2015

**Transaction ID : A385A607BEB0746DB8A1**

Amount of Each Receipt this Period  
 250.00

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

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

860.00

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

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

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

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

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

Mailing Address 1225 Benedict Canyon Drive

City State Zip Code  
Beverly Hills CA 90210-2727

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

Name of Employer Occupation  
Stein & Associates Attorney

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  
 06 / 01 / 2015

**Transaction ID : AA0D27EC6BEB14AC5887**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 3629 Sheridge Drive

City State Zip Code  
Sherman Oaks CA 91403-5004

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

Name of Employer Occupation  
Stein & Associates Business Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 01 / 2015

**Transaction ID : A8B9D5AD8E8D5493F9E5**

Amount of Each Receipt this Period  
1150.00

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

Mailing Address 8823 Pickford Street

City State Zip Code  
Los Angeles CA 90035-4210

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

Name of Employer Occupation  
N/A Homemaker

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  
 06 / 03 / 2015

**Transaction ID : AE92101450B364B468B8**

Amount of Each Receipt this Period  
500.00

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

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

3650.00

**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 14 OF 115

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

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

Mailing Address 1467 S. Durango Avenue

City Los Angeles State CA Zip Code 90035-3329

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

Name of Employer CPEhr 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  
 06 / 03 / 2015

**Transaction ID : AEA53FB4971B3459F95C**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 9355 Kirkside Road

City Los Angeles State CA Zip Code 90035-4126

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

Name of Employer Self 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  
 06 / 03 / 2015

**Transaction ID : AEE5718F727DF40EBBFC**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 100 N. Sepulveda Blvd.

City Redondo Beach State CA Zip Code 90278

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

Name of Employer Prodege, LLC Occupation Online Marketing

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2015

**Transaction ID : A01A05C0C52CE428596B**

Amount of Each Receipt this Period  
 625.00

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

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

1375.00

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

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

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

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

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

Mailing Address 1029 10th Street

City State Zip Code  
Hermosa Beach CA 90254-4342

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

Name of Employer Occupation  
Millenium Consulting 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  
 06 / 01 / 2015

**Transaction ID : ADB5653CC892E44E0B6D**

Amount of Each Receipt this Period  
 1250.00

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

Mailing Address 137 S. Swall Drive

City State Zip Code  
Beverly Hills CA 90211-2610

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2015

**Transaction ID : A7C3089A8A4124343B39**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 126 Via Florenza

City State Zip Code  
Palm Beach Gardens FL 33418-6203

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2015

**Transaction ID : A29DC7E2D0FFF4458859**

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

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

**A. Errol Fine**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9350 Oakmore Road  
 City Los Angeles State CA Zip Code 90035-4137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pat's Restaurant & Catering Occupation Caterer  
 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  
 06 / 03 / 2015  
**Transaction ID : A723A22E9F2BF4D8C869**  
 Amount of Each Receipt this Period  
 250.00

**B. Gary H Marks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2821 Fairway Dr  
 City Hollywood State FL Zip Code 33021-2936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MARKS & FLEISCHER 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  
 04 / 16 / 2015  
**Transaction ID : AF1EA204B0F7F45ED84D**  
 Amount of Each Receipt this Period  
 500.00

**C. Alan Nissel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 273 S. Palm Drive  
 City Beverly Hills State CA Zip Code 90212-3515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wilshire Skyline Occupation In-House Counsel  
 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  
 06 / 03 / 2015  
**Transaction ID : A6E31A82269C0452982E**  
 Amount of Each Receipt this Period  
 250.00

**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: PAGE 17 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 2648 The Strand

City State Zip Code  
Hermosa Beach CA 90254-2420

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

Name of Employer Occupation  
NyX Cosmetics Executive

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**625.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 04 / 2015**

**Transaction ID : AC73E73CBE3394E34824**

Amount of Each Receipt this Period  
**625.00**

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

Mailing Address 7000 Corning Cir

City State Zip Code  
Boynton Beach FL 33437-3984

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

Name of Employer Occupation  
Oblon, Spivak 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  
**05 / 25 / 2015**

**Transaction ID : AC3DEC70A8A834F25B2A**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 2414 Guthrie Drive

City State Zip Code  
Los Angeles CA 90034-1061

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

Name of Employer Occupation  
N/A Retired

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  
**06 / 03 / 2015**

**Transaction ID : AF961A12B6C774CE5A71**

Amount of Each Receipt this Period  
**250.00**

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

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

**1375.00**

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

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

FOR LINE NUMBER: PAGE 18 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence E Feigen**

Mailing Address 336 South Hudson Avenue  
Ste 1100

City Los Angeles State CA Zip Code 90020-4804

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

Name of Employer SnF Management Occupation COO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015

**Transaction ID : A671FAF9E37D7466585E**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 11605 Crow Hill Drive

City Parker State CO Zip Code 80134-7119

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

Name of Employer Self Occupation Teacher

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2015

**Transaction ID : A1BCBCACB996C425B8C9**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 107 Grand Palm Way

City Palm Beach Gardens State FL Zip Code 33418-4630

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2015

**Transaction ID : A7C7260AA4C534616BD5**

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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 19 OF 115

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

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

Mailing Address 914 Westwood Blvd Suite 582  
 # 385

City Los Angeles State CA Zip Code 90024-2905

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

Name of Employer Self 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  
 04 / 17 / 2015

**Transaction ID : AA7AFA05475A14397B9A**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 4328 Manson Avenue

City Woodland Hills State CA Zip Code 91364-4853

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

Name of Employer Santa Monica Europeans Occupation Auto Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : AB0D5153DAB774851BB6**

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
**Philip L Miller MD**

Mailing Address 400 NE 12th Ave Apt 308  
 Apt. 308

City Hallandale Beach State FL Zip Code 33009-4514

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

Name of Employer Retired 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  
 04 / 16 / 2015

**Transaction ID : AC0BFC370143A4247A93**

Amount of Each Receipt this Period  
 500.00

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

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

1800.00

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

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

FOR LINE NUMBER: PAGE 20 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 10166  
Rush Street

City State Zip Code  
South El Monte CA 91733-3224

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

Name of Employer Occupation  
Housewife Housewife

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2015

**Transaction ID : AF48855C06D9D4F91A48**

Amount of Each Receipt this Period  
 5400.00

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

Mailing Address 2107 Duxbury Circle

City State Zip Code  
Los Angeles CA 90034-1013

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

Name of Employer Occupation  
RPK Development Corp. Real Estate Developer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : AAA61B30515C049868A9**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 10393 Strathmore Dr

City State Zip Code  
Los Angeles CA 90024-2538

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2015

**Transaction ID : A71FE12FEF7454EF48BA**

Amount of Each Receipt this Period  
 250.00

**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: PAGE 21 OF 115  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

Mailing Address 608 N. Beverly Drive

City State Zip Code  
Beverly Hills CA 90210-3320

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

Name of Employer Occupation  
Antex Knitting Mills Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2015

**Transaction ID : AA1BE915B5C3F40A09D4**

Amount of Each Receipt this Period  
1200.00

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

Mailing Address 6773 Fashion Hill Blvd

City State Zip Code  
San Diego CA 92111-7625

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

Name of Employer Occupation  
San Diego Pallets Sales

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  
 06 / 03 / 2015

**Transaction ID : AC3510DD4B0A04231A70**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2432 Guthrie Court

City State Zip Code  
Los Angeles CA 90034-1057

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

Name of Employer Occupation  
Merrill Lynch Investment Advisor

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  
 06 / 03 / 2015

**Transaction ID : A2DBAA69B914D4DA59ED**

Amount of Each Receipt this Period  
250.00

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

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

1700.00

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

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

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

Mailing Address 9325 Duxbury Road

City Los Angeles State CA Zip Code 90034-1022

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

Name of Employer Wolf Rifkin Shapiro Schulman & Rabkin 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  
 06 / 03 / 2015

**Transaction ID : A0C20D1AA45064300ACE**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 635 3rd Key Dr

City Fort Lauderdale State FL Zip Code 33304-3805

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

Name of Employer Self 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  
 04 / 29 / 2015

**Transaction ID : A48F08A9649BB4119BE**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 10184 Osprey Trce

City West Palm Beach State FL Zip Code 33412-1541

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 Y  
 05 / 06 / 2015

**Transaction ID : ACE62EE498DC5438EB8B**

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 23 OF 115  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

A. Full Name (Last, First, Middle Initial)  
**Scott Barry Newman**

Mailing Address 454 Savoie Dr

City State Zip Code  
Palm Beach Gardens FL 33410-1606

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

Name of Employer Occupation  
Hollande Knight LLP 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  
 05 / 25 / 2015

**Transaction ID : A16C4EDC66A2549478CF**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 222424

City State Zip Code  
Chantilly VA 20153-2424

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

Name of Employer Occupation  
USINPAC Executive Director

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  
 06 / 27 / 2015

**Transaction ID : A5F6130B97B19427E8F1**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1245 S. Bedford Drive

City State Zip Code  
Los Angeles CA 90035-1014

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

Name of Employer Occupation  
Self Accountant

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  
 06 / 03 / 2015

**Transaction ID : A556F1CADA0A94CEAB77**

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: PAGE 24 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 1541 S. Cardiff Ave.

City Los Angeles State CA Zip Code 90035-3206

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

Name of Employer Self 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  
 06 / 03 / 2015

**Transaction ID : AE45F2BBB41B94658B70**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 5251 Woodman Avenue

City Sherman Oaks State CA Zip Code 91401-5829

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

Name of Employer N/A 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 Y  
 06 / 03 / 2015

**Transaction ID : ADCECA742AA364FA0B89**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 370 Golfview Rd Apt 701

City North Palm Beach State FL Zip Code 33408-3587

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

Name of Employer The Scripps Research Institute Occupation Associate 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  
 04 / 29 / 2015

**Transaction ID : AC6BF362CDBFE434AA4A**

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: PAGE 25 OF 115  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

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

Mailing Address 229 Nurmi Dr

City State Zip Code  
Fort Lauderdale FL 33301-1406

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

Name of Employer Occupation  
H.I.G. Capital Private Equity

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  
 04 / 16 / 2015

**Transaction ID : A0981D181FA2F4D0D8CC**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 450 S. Maple Drive

City State Zip Code  
Beverly Hills CA 90212-4797

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

Name of Employer Occupation  
Information Requested Homemaker

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  
 05 / 27 / 2015

**Transaction ID : A9F47CC05D3724584887**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Norman Fredrick Lent III**

Mailing Address 3529 Malvern Ct

City State Zip Code  
Alexandria VA 22304-1852

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

Name of Employer Occupation  
Arent Fox Counsel

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  
 05 / 29 / 2015

**Transaction ID : A0319E3868D904DE5B58**

Amount of Each Receipt this Period  
250.00

**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: PAGE 26 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Igal Elyassi DDS**

Mailing Address 6200 Wilshire Blvd.  
Ste. 1609

City Los Angeles State CA Zip Code 90048-5817

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

Name of Employer Igal Elyassi DDS Inc. Occupation Dentist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2015

**Transaction ID : A0CD86DB2D85B4A358C0**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 12209 Tillinghast Cir

City Palm Beach Gardens State FL Zip Code 33418-1554

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 Y  
 05 / 06 / 2015

**Transaction ID : AFD1EAD1DF6204A748C8**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 159 S Hudson Pl

City Los Angeles State CA Zip Code 90004-1037

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

Name of Employer Kornwasser Occupation Executive 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  
 06 / 05 / 2015

**Transaction ID : A88657C1D6AFB4AF9A83**

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 27 OF 115  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

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

Mailing Address 9570 Virginia Place

City State Zip Code  
Beverly Hills CA 90212-4208

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

Name of Employer Occupation  
Social WORK Professionals Vice President of Operations

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  
 06 / 10 / 2015

**Transaction ID : A92D432D3FB0743E7A79**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 433 N. Camden Drive

City State Zip Code  
Beverly Hills CA 90210-4409

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

Name of Employer Occupation  
Self Real Estate Investments

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  
 06 / 01 / 2015

**Transaction ID : AF40520018C0748C4AE1**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address 721 San Luis Road

City State Zip Code  
Berkeley CA 94707-2029

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

Name of Employer Occupation  
The Car Company Business Owner

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  
 05 / 25 / 2015

**Transaction ID : A484C41429FBA4931910**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 312 N. June Street

City Los Angeles State CA Zip Code 90004-1042

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

Name of Employer Goldstar Healthcare Occupation Nursing Home Owner/Operator

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  
 06 / 05 / 2015

**Transaction ID : A04835FDDDA454BA0807**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 2121 Avenue of the Stars

City Los Angeles State CA Zip Code 90067-5010

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

Name of Employer Goldman Sachs Occupation Investment Management

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 Y  
 06 / 04 / 2015

**Transaction ID : A8C161DC1238F45C8AF5**

Amount of Each Receipt this Period  
**1250.00**

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

Mailing Address 1907 Laurel Avenue

City Manhattan Beach State CA Zip Code 90266-2538

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

Name of Employer Self Occupation Philanthropist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2015

**Transaction ID : A73AA24D2CA1B4C63A8F**

Amount of Each Receipt this Period  
**625.00**

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

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

**2125.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 1332 Penguin Cir

City Virginia Beach State VA Zip Code 23451-4933

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

Name of Employer RST Development Occupation President/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  
 05 / 06 / 2015

**Transaction ID : ABAEF2F4D7600407C915**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 2637 Mohawk Circle

City West Palm Beach State FL Zip Code 33409-7139

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

Name of Employer Noble Properties 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  
 06 / 30 / 2015

**Transaction ID : A4B53D7B4EF4D409A935**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1457 Reeves Street Apt. 103

City Los Angeles State CA Zip Code 90035-2970

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

Name of Employer N/A 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 Y  
 06 / 03 / 2015

**Transaction ID : A887A38C8CA894C91B67**

Amount of Each Receipt this Period  
 250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 52 e union blvd

City Bethlehem State PA Zip Code 18018-4079

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

Name of Employer Homemaker Occupation Homemaker

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  
 05 / 28 / 2015

**Transaction ID : A1322C4FD07FE4D60BD6**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 625 Cypress Avenue

City Hermosa Beach State CA Zip Code 90254-4645

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

Name of Employer Self Occupation Philanthropist

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 Y  
 06 / 09 / 2015

**Transaction ID : AB13CEBE2A5DD44FABF4**

Amount of Each Receipt this Period  
1250.00

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

Mailing Address 9715 Cresta Drive

City Los Angeles State CA Zip Code 90035-4005

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

Name of Employer Woodard Group Occupation Executive Placement

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  
 06 / 03 / 2015

**Transaction ID : A750D13C707544E52AEF**

Amount of Each Receipt this Period  
250.00

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 31 OF 115  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

Mailing Address 148 S Fairfax Ave  
FI 4

City State Zip Code  
Los Angeles CA 90036-2107

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

Name of Employer Occupation  
Joseph Kornwasser, ESQ 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  
 06 / 05 / 2015

**Transaction ID : AB8CAF129A98543ED8FE**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 6700 E Beechlands Dr

City State Zip Code  
Cincinnati OH 45237-3728

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  
 05 / 06 / 2015

**Transaction ID : AF1A6F33A54564619BCB**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 865 17th Street

City State Zip Code  
Manhattan Beach CA 90266-4910

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

Name of Employer Occupation  
West Dermatology CFO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
625.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 09 / 2015

**Transaction ID : A4990DA29E9244E65957**

Amount of Each Receipt this Period  
625.00

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

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

1625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 3140 S Ocean Drive  
Ph 25

City State Zip Code  
Palm Beach FL 33480-5624

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 Y  
04 / 29 / 2015

**Transaction ID : A3BA4849B634C45C4AF4**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 501 S Flagler Drive  
Suite 450

City State Zip Code  
West Palm Beach FL 33401-5911

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

Name of Employer Occupation  
Fisher & Bendeck 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  
04 / 29 / 2015

**Transaction ID : AB69C8B48A7974C6CA5B**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 11400 W. Olympic Blvd.  
9th Floor

City State Zip Code  
Los Angeles CA 90064-1582

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

Name of Employer Occupation  
Wolf Rifkin Shapiro Schulman & Rabkin 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  
05 / 27 / 2015

**Transaction ID : A94D114965BEA486CAEB**

Amount of Each Receipt this Period  
750.00

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

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

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

Mailing Address 36 Hurst Court

City San Ramon State CA Zip Code 94583-4782

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

Name of Employer Self 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  
 05 / 28 / 2015

**Transaction ID : AA2E2B5EE8185486CA43**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1311 Cardova Avenue

City Glendale State CA Zip Code 91207-1529

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

Name of Employer Woodward Co. Occupation MRB Staff/Technical Lead Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : A335F9EC423E8414AAC0**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 400 Continental Blvd, Suite 600

City El Segundo State CA Zip Code 90245-5074

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

Name of Employer Klein Partners Occupation Private Equity

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 05 / 2015

**Transaction ID : A945E9B736EAC4BB1869**

Amount of Each Receipt this Period  
 625.00

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

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

2625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 10359 Crossbeam Court

City Columbia State MD Zip Code 21044-3819

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  
 05 / 25 / 2015

**Transaction ID : AB3218654E0AF4363A40**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 9766 Beth Place

City Beverly Hills State CA Zip Code 90210-1504

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

Name of Employer Teles Properties Occupation Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 27 / 2015

**Transaction ID : AE262D5EA73D34609A2F**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 19401 NW 8th St

City Pembroke Pines State FL Zip Code 33029-3256

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

Name of Employer Greenberg Traurig 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  
 04 / 16 / 2015

**Transaction ID : A8A794398BA8B48FEA7B**

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 35 OF 115  
(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)  
**Engel for Congress**

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

Mailing Address 2006 Columbia Rd NW  
Apt 7

City Washington State DC Zip Code 20009-1320

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

Name of Employer Levick 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  
 05 / 29 / 2015

**Transaction ID : A08A273BB2F7B4379984**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2438 E. Commercial Blvd

City Fort Lauderdale State FL Zip Code 33308-4040

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

Name of Employer self employed Occupation Medical Doctor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : AEF0AA78B2A3E4C13A98**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 9420 Wilshire Blvd.  
Suite 400

City Beverly Hills State CA Zip Code 90212-3151

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2015

**Transaction ID : AA8342719B81E474696D**

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: PAGE 36 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 540 W. Knoll Drive #3

City West Hollywood State CA Zip Code 90048-2011

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

Name of Employer Center for the Developing Mind Occupation Psychologist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2015

**Transaction ID : A76BEAECCA1FF4E158E4**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 9420 Wilshire Blvd. Suite 400

City Beverly Hills State CA Zip Code 90212-3151

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

Name of Employer Omninet Capital Occupation Managing 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  
 05 / 27 / 2015

**Transaction ID : A20E2DEFC371F4A6C95B**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 52 e union blvd

City Bethlehem State PA Zip Code 18018-4079

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : A88D0DE38015C48E184A**

Amount of Each Receipt this Period  
 2700.00

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

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

3450.00

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

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

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

Mailing Address 1745 SE 10th St

City State Zip Code  
Fort Lauderdale FL 33316-1423

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  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 29 / 2015

**Transaction ID : A50D4A5FE8F6440F49DE**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3141 Ocana Avenue

City State Zip Code  
Long Beach CA 90808-3715

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

Name of Employer Occupation  
Self Designer

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  
05 / 29 / 2015

**Transaction ID : A8CC0A88ED58F42AEB63**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 215 S. Valley Drive

City State Zip Code  
Manhattan Beach CA 90266-6552

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

Name of Employer Occupation  
Gibson Dunn Attorney

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 Y  
06 / 04 / 2015

**Transaction ID : AD9AABEDE85E74337B20**

Amount of Each Receipt this Period  
1250.00

**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 38 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 11400 West Olympic Blvd  
9th Floor

City State Zip Code  
Los Angeles CA 90064-1582

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

Name of Employer Occupation  
Wolf Rifkin Shapiro Schulman & Rabkin 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  
 06 / 10 / 2015

**Transaction ID : AA55E395037D14578A48**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 105 Vizcaya Estates Dr

City State Zip Code  
Palm Beach Gardens FL 33418-1734

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

Name of Employer Occupation  
Sun Water Heaters 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 Y  
 05 / 25 / 2015

**Transaction ID : ACB8F0B386FE847C9A5D**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 446 S. Rodeo Drive

City State Zip Code  
Beverly Hills CA 90212-4220

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

Name of Employer Occupation  
Saban Capital Group CFO

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  
 06 / 03 / 2015

**Transaction ID : AE7B048D88CBC4548A73**

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 39 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 314 E Dania Beach Blvd

City State Zip Code  
Dania FL 33004-3028

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

Name of Employer Occupation  
Wireless Delta, Inc. PD/Engineer

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  
 04 / 17 / 2015

**Transaction ID : ACBA7FB608737444CBC6**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1000 W Island Blvd Ste 1603 #1906

City State Zip Code  
Aventura FL 33160-5611

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

Name of Employer Occupation  
Mo's Deli 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  
 04 / 29 / 2015

**Transaction ID : A67CE9384946B458EB20**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 14 Colonial

City State Zip Code  
Irvine CA 92620-2519

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

Name of Employer Occupation  
Century 21 Award Realtor

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  
 05 / 29 / 2015

**Transaction ID : A9ED6DE71F31A472EB9D**

Amount of Each Receipt this Period  
1000.00

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

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

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

Mailing Address 1012 Cornhill Way

City Folsom State CA Zip Code 95630-6123

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

Name of Employer Capitol Bowl Occupation Businessman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2015

**Transaction ID : AF60BB00733584733A1D**

Amount of Each Receipt this Period  
 1500.00

1500.00

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

Mailing Address 13900 Le Habre Drive

City Palm Beach Gardens State FL Zip Code 33410-1248

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

Name of Employer N/A 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 Y  
 06 / 29 / 2015

**Transaction ID : A6AA5F8B88FD54F48805**

Amount of Each Receipt this Period  
 500.00

500.00

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

Mailing Address 2029 Century Park East

City Los Angeles State CA Zip Code 90067-2901

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

Name of Employer Gibson Dunn 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  
 06 / 04 / 2015

**Transaction ID : A2DB7821F5AD74FA898F**

Amount of Each Receipt this Period  
 375.00

375.00

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

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

2375.00



**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 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Peter K Hoffman**

Mailing Address 107 Grand Palm Way

City State Zip Code  
Palm Beach Gardens FL 33418-4630

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 M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2015

**Transaction ID : A34DB14B914A44056B08**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 440 N Las Palmas Ave

City State Zip Code  
Los Angeles CA 90004-1016

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015

**Transaction ID : A1E1A2878586648DE8DE**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 5556 Mason Avenue

City State Zip Code  
Woodland Hills CA 91367-6841

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

Name of Employer Occupation  
Superior Industries Corporate Commodity Purchasing Manager

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : A4F1B1ABF42854DFCB82**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1179 S. Rodeo Drive

City Los Angeles State CA Zip Code 90035-1115

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

Name of Employer Self Occupation Real Estate Investor

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  
 06 / 03 / 2015

**Transaction ID : AD2D089FD082C4634AB3**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 2109 Vanderbilt Lane  
Unit B

City Redondo Beach State CA Zip Code 90278-3020

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

Name of Employer Fox Sports Occupation Vice President of Production

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2015

**Transaction ID : A6FA8753B9CD5419BA19**

Amount of Each Receipt this Period  
**625.00**

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

Mailing Address 2900 Le Bateau Dr

City Palm Beach Gardens State FL Zip Code 33410-1289

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

Name of Employer Self Occupation Insurance Broker

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  
 06 / 18 / 2015

**Transaction ID : A216E0CAB9C4F421B874**

Amount of Each Receipt this Period  
**500.00**

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

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

**1375.00**

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Barry S Berg**

Mailing Address 51 Saint James Dr

City State Zip Code  
Palm Beach Gardens FL 33418-4019

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

Name of Employer Occupation  
Credit Suisse Financial 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  
05 / 06 / 2015

**Transaction ID : AA409F556185D488BBDB**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 135 S Formosa Ave

City State Zip Code  
Los Angeles CA 90036-2815

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

Name of Employer Occupation  
Martin Fishman Insurance Agency Insurance Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2015

**Transaction ID : A969DBCC385C14367819**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 788 Harbour Isles Court

City State Zip Code  
West Palm Beach FL 33410-4417

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

Name of Employer Occupation  
Self Life Insurance Rep

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 06 / 2015

**Transaction ID : A6AF5E8A8A7ED4A019F2**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 44 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 2108 Vali Avenue

City Redondo Beach State CA Zip Code 90278-2518

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

Name of Employer Jewish Community Center Occupation Rabbi

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2015

**Transaction ID : A85E336C2940E437DA28**

Amount of Each Receipt this Period  
 600.00

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

Mailing Address 2708 The Strand

City Manhattan Beach State CA Zip Code 90266-2154

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

Name of Employer Allegre Pacific Inc. 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  
 06 / 01 / 2015

**Transaction ID : A5089370F2DA748829C8**

Amount of Each Receipt this Period  
 675.00

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

Mailing Address 7143 Winding Bay Ln

City West Palm Beach State FL Zip Code 33412-3039

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

Name of Employer self employed Occupation Doctor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2015

**Transaction ID : AFF1DBED227DF45AB97F**

Amount of Each Receipt this Period  
 500.00

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

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

1775.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 9308 Oakmore Drive

City Los Angeles State CA Zip Code 90035-4137

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

Name of Employer Rainbow Adult Day Health Care Occupation Adult Day Care

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : AE38430F52847468991E**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 114 Via Mariposa

City Palm Beach Gardens State FL Zip Code 33418-6211

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 Y  
 05 / 25 / 2015

**Transaction ID : A14E419737AD24CC0879**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 842 La Vina Lane

City Altadena State CA Zip Code 91001-3754

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

Name of Employer California Institute of Technology Occupation Professor, Vice Provost

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : AA75EF69D077D403688C**

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: PAGE 46 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Stewart D Shull MD**

Mailing Address 5618 Oakmont Ave

City State Zip Code  
Fort Lauderdale FL 33312-6269

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

Name of Employer Occupation  
Self 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  
 04 / 16 / 2015

**Transaction ID : AFE30B5FFF7C7404EB6A**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 18341 Sherman Way #104B

City State Zip Code  
Reseda CA 91335-4497

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

Name of Employer Occupation  
Soltani Construction & Engineering General Contractor & Developer

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  
 05 / 25 / 2015

**Transaction ID : A2F692CEEC6A54439910**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 10561 Hawks Landing Ter

City State Zip Code  
West Palm Beach FL 33412-3106

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  
 05 / 25 / 2015

**Transaction ID : AF2874483FE1345FEB92**

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 47 OF 115  
(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)  
**Engel for Congress**

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

Mailing Address 19550 E. Cienega Avenue  
#35

City State Zip Code  
Covina CA 91724-4007

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

Name of Employer Occupation  
White Memorial Medical Center Clinical Lab Scientist

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  
 05 / 29 / 2015

**Transaction ID : A08CDBE1433874A73AB1**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 9635 Kirkside Rd.

City State Zip Code  
Los Angeles CA 90035-4009

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

Name of Employer Occupation  
N/A Homemaker

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  
 06 / 05 / 2015

**Transaction ID : AE551E2EC42554815B31**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 36 Hurst Ct

City State Zip Code  
San Ramon CA 94583-4782

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

Name of Employer Occupation  
Self Test Engineer Consultant

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  
 05 / 28 / 2015

**Transaction ID : AB3C06B5730CA4F25A71**

Amount of Each Receipt this Period  
1000.00

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

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

2750.00

**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 115  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

Mailing Address 424 S Beverly Dr

City State Zip Code  
Beverly Hills CA 90212-4402

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

Name of Employer Occupation  
Self-employed 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  
 06 / 01 / 2015

**Transaction ID : A8FDE6A8F0CDE4D46B5C**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1631 Durango Avenue

City State Zip Code  
Los Angeles CA 90035-3326

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

Name of Employer Occupation  
Friedman Consulting Financial Analyst

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2015

**Transaction ID : AC5830788D90B46DE805**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1 Lincoln Plz Apt 23K  
Apt. 23K

City State Zip Code  
New York NY 10023-7150

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

Name of Employer Occupation  
Discovery Air 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  
 06 / 27 / 2015

**Transaction ID : ACF124DB5E95D4476A1C**

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 49 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 486 S. Spalding Drive

City Beverly Hills State CA Zip Code 90212-4104

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

Name of Employer Self Occupation Advertising

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 03 / 2015

**Transaction ID : A3DC4E4ECEF1A43AA901**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 9570 Virginia Place

City Beverly Hills State CA Zip Code 90212-4208

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

Name of Employer Social WORK Professionals Occupation Vice President of Operations

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 03 / 2015

**Transaction ID : A2952ADD130E4436B8C3**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 219 Via Lido Sound

City Newport Beach State CA Zip Code 92663-4613

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

Name of Employer N/A 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  
 05 / 27 / 2015

**Transaction ID : A5BC1378B38E64DF29AB**

Amount of Each Receipt this Period  
 500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Engel for Congress**

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

Mailing Address 10262 Heronwood Ln

City State Zip Code  
West Palm Beach FL 33412-1522

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  
05 / 25 / 2015

**Transaction ID : A54175014D2BB4BD0AF8**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 8631 W. 3rd Street #101E

City State Zip Code  
Los Angeles CA 90048-5901

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

Name of Employer Occupation  
Self Dentist

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  
06 / 05 / 2015

**Transaction ID : A37E95CF9EDD6452F870**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4386 James Estate Ct

City State Zip Code  
Lake Worth FL 33449-8630

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  
05 / 25 / 2015

**Transaction ID : AC9EEA7BFF7B64EA6BEF**

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

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

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

Mailing Address 598 33rd Street

City State Zip Code  
Manhattan Beach CA 90266-3406

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

Name of Employer Occupation  
Evergreen Design Buiding, Inc. Real Estate Developer

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  
 06 / 04 / 2015

**Transaction ID : A67F3976184514C50A22**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 9020 W. Olympic Blvd

City State Zip Code  
Beverly Hills CA 90211-3516

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

Name of Employer Occupation  
Beth Jacob Rabbi

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  
 06 / 03 / 2015

**Transaction ID : AA383ACDED74A45FCAFA**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 52 East Union Blvd.

City State Zip Code  
Bethlehem PA 18018-4079

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

Name of Employer Occupation  
NFS inc CEO

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  
 06 / 01 / 2015

**Transaction ID : A5F0DF18863DA413FA43**

Amount of Each Receipt this Period  
2700.00

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

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

3450.00

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

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

FOR LINE NUMBER: PAGE 52 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**S. Jack Fenigstein**

Mailing Address 2178 Guthrie Drive

City Los Angeles State CA Zip Code 90034-1028

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

Name of Employer Fenigstein & Kaufman 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  
 06 / 03 / 2015

**Transaction ID : A91380BAAA6CA4DF38F3**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 223 Seminole Ave

City Palm Beach State FL Zip Code 33480-3734

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 Y  
 05 / 25 / 2015

**Transaction ID : A5B368CEDAF8E429FAF9**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Peter A Livingston MD**

Mailing Address 3691 Estate Oak Cir

City Fort Lauderdale State FL Zip Code 33312-6282

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

Name of Employer self employed 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 Y  
 04 / 16 / 2015

**Transaction ID : ACC0DC547FD6460882B**

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

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

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

Mailing Address 9111 Sawyer Street

City Los Angeles State CA Zip Code 90035-4142

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

Name of Employer Self Occupation Interior Design

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : A3E890FFA3B5E44AF8D3**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 2580 Tecumseh Dr

City West Palm Beach State FL Zip Code 33409-8009

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

Name of Employer Carlton Fields 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  
 05 / 06 / 2015

**Transaction ID : A5C05E463897547CF9B3**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1880 Century Park East #100

City Los Angeles State CA Zip Code 90067-1626

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

Name of Employer Gerber & Co Occupation Property Management

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : A912E141413634AB9B44**

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 54 OF 115  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

Mailing Address 356 S. Rimpau Blvd

City Los Angeles State CA Zip Code 90020-4828

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2015

**Transaction ID : A62E4BC796E144FCCA99**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 5012 Scarsdale Road

City Bethesda State MD Zip Code 20816-2438

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

Name of Employer Williams & Jensen, PLLC 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  
 06 / 27 / 2015

**Transaction ID : A8137F49143E04833911**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 555 S. Laureltree Drive

City Anaheim State CA Zip Code 92808-1627

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

Name of Employer Art of Dentistry Occupation Registered Dental Hygienist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2015

**Transaction ID : A2E95A8CE0CAC46FCBE8**

Amount of Each Receipt this Period  
 1500.00

**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 55 OF 115  
(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)  
**Engel for Congress**

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

Mailing Address 149 S Highland Ave

City State Zip Code  
Los Angeles CA 90036-3028

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

Name of Employer Occupation  
SLT Consultants Housing Consultant

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  
 06 / 05 / 2015

**Transaction ID : AA2B6597C84644574998**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jenny C P Margulies**

Mailing Address 3241 SW 51st

City State Zip Code  
Fort Lauderdale FL 33312-7916

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

Name of Employer Occupation  
Self Homemaker

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  
 04 / 16 / 2015

**Transaction ID : AF380E822D1214D6FAED**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1500 Ocean Dr  
Apt 903

City State Zip Code  
Miami Beach FL 33139-3133

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

Name of Employer Occupation  
Arredondo & Co Real Estate 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 Y  
 04 / 29 / 2015

**Transaction ID : A151455A55E554C55B03**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Engel for Congress**

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

Mailing Address 144 Vintageisle Ln

City State Zip Code  
Palm Beach Gardens FL 33418-4604

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  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 25 / 2015

**Transaction ID : A98FBAA4E666A429A81C**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 450 East Las Olas Boulevard  
Suite 1400

City State Zip Code  
Fort Lauderdale FL 33301-4206

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

Name of Employer Occupation  
Gunster Law Firm 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  
04 / 16 / 2015

**Transaction ID : A9304486D26A94D3DB43**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 9437 Cresta Drive

City State Zip Code  
Los Angeles CA 90035-4120

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

Name of Employer Occupation  
Cedars-Sinai Medical Center Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 03 / 2015

**Transaction ID : AE54266EA3845433288C**

Amount of Each Receipt this Period  
1200.00

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

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

2700.00



**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 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 800 Pacific Avenue

City Manhattan Beach State CA Zip Code 90266-5850

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

Name of Employer Intrepid Occupation Investment Banker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2015

**Transaction ID : AF1EA6F4CF5374010A0A**

Amount of Each Receipt this Period  
 625.00

**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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

625.00

107660.00

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

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

FOR LINE NUMBER: PAGE 58 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 1101 New York Avenue, NW

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C C00428623**

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  
 06 / 02 / 2015

**Transaction ID : A301A1493544B4ED2B64**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Cablevision Systems Corp. PAC**

Mailing Address 1111 Stewart Avenue

City Bethpage State NY Zip Code 11714-3533

FEC ID number of contributing federal political committee. **C C00197863**

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  
 05 / 13 / 2015

**Transaction ID : A82C042DB609A4874AE3**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Napus PAC For Postmasters of the US**

Mailing Address 8 Herbert Street

City Alexandria State VA Zip Code 22305-2628

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2015

**Transaction ID : AF09B15AEE9114B70871**

Amount of Each Receipt this Period  
 2000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 115
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Wakefern Food Corp. WAKEPAC**

Mailing Address 33 Northfield Avenue

City Edison State NJ Zip Code 08837-3806

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : A62036952846549FDA00**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Health Care Association PAC**

Mailing Address 1201 L Street, NW

City Washington State DC Zip Code 20005-4024

FEC ID number of contributing federal political committee. **C** C00006080

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  
 05 / 27 / 2015

**Transaction ID : A0737828127184BD3A32**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 701 Pennsylvania Ave., NW  
Suite 725

City Washington State DC Zip Code 20004-2608

FEC ID number of contributing federal political committee. **C** C00033969

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  
 06 / 30 / 2015

**Transaction ID : A4319BBF3888D4FD9BBD**

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

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

**A. National Action Comm - NACPAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 500 E Broward Blvd 18th Floor

City Fort Lauderdale State FL Zip Code 33394-3000

FEC ID number of contributing federal political committee. **C C00147983**

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  
 05 / 05 / 2015

**Transaction ID : AC36615FBC9D947559DC**

Amount of Each Receipt this Period  
 3500.00

**B. AZ PAC (AstraZeneca, Inc)**

Full Name (Last, First, Middle Initial)  
Mailing Address 1800 Concord Pike  
PO Box 15438

City Wilmington State DE Zip Code 19850-5438

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 / D D / Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A7311BEFDE919410C970**

Amount of Each Receipt this Period  
 1000.00

**C. T-Mobile PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 401 9th Street, NW  
Suite 550

City Washington State DC Zip Code 20004-2141

FEC ID number of contributing federal political committee. **C C00361758**

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  
 06 / 29 / 2015

**Transaction ID : AE251CB9A959346C981A**

Amount of Each Receipt this Period  
 1000.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 61 OF 115  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A. Cummins Inc, PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 601 Pennsylvania Avenue, NW  
 North Bldg, Ste 625  
 City Washington State DC Zip Code 20004-2601  
 FEC ID number of contributing federal political committee. **C C00377952**  
 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  
 05 / 27 / 2015  
**Transaction ID : A9DD5077235C34F508AC**  
 Amount of Each Receipt this Period  
 500.00

**B. Lockheed Martin EPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1550 Crystal Drive  
 Crystal Square Two  
 City Arlington State VA Zip Code 22202-4135  
 FEC ID number of contributing federal political committee. **C C00303024**  
 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  
 05 / 29 / 2015  
**Transaction ID : A1277FC4402E24C16A57**  
 Amount of Each Receipt this Period  
 1000.00

**C. Comcast Corporation & NBCUniversal PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Comcast Center  
 1701 JFK Boulevard  
 City Philadelphia State PA Zip Code 19103-2838  
 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

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 02 / 2015  
**Transaction ID : AADAA38B68FEA4392924**  
 Amount of Each Receipt this Period  
 1000.00

**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 62 OF 115  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A. Boeing PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 Wilson Blvd  
 City Arlington State VA Zip Code 22209-2300  
 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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2015  
**Transaction ID : AE6FBA4806804427B9FA**  
 Amount of Each Receipt this Period  
 1000.00

**B. sTime Warner PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 Connecticut Avenue NW Suite 200  
 City Washington State DC Zip Code 20006-2720  
 FEC ID number of contributing federal political committee. **C** C00339291  
 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  
 06 / 27 / 2015  
**Transaction ID : A1D56814BAF724EDCAF7**  
 Amount of Each Receipt this Period  
 1000.00

**C. National Association of Broadcasters PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1771 N. Street, NW  
 City Washington State DC Zip Code 20036-2800  
 FEC ID number of contributing federal political committee. **C** C00009985  
 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  
 06 / 30 / 2015  
**Transaction ID : A64F380EF11CF4CDB817**  
 Amount of Each Receipt this Period  
 1500.00

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 115
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**American Institute of CPAs**

Mailing Address **Palladian Corporate Center I**  
**220 Leigh Farm Road**

City **Durham** State **NC** Zip Code **27707-8110**

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

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  
**06 / 30 / 2015**

**Transaction ID : A59398C31EB354AD4AE7**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Akin Gump Strauss Hauer PAC**

Mailing Address **1333 New Hampshire Avenue, Nw**

City **Washington** State **DC** Zip Code **20036-1500**

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

Name of Employer Occupation

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  
**06 / 27 / 2015**

**Transaction ID : AFDF3D11C9E9E44A6ACF**

Amount of Each Receipt this Period  
**750.00**

**C.** Full Name (Last, First, Middle Initial)  
**American Dental Political Action Committ**

Mailing Address **1111 - 14th Street, NW**  
**Suite1100**

City **Washington** State **DC** Zip Code **20005-5627**

FEC ID number of contributing federal political committee. **C C00000729**

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  
**06 / 27 / 2015**

**Transaction ID : A8CCD2473105F4EA7B9B**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2750.00**

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

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

FOR LINE NUMBER: PAGE 64 OF 115  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

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

Mailing Address 1200 Wilson Blvd

City State Zip Code  
Arlington VA 22209-2300

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  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2015

**Transaction ID : ACC94DE6D496F44F5907**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1101 Vermont Avenue, NW

City State Zip Code  
Washington DC 20005-3521

FEC ID number of contributing federal political committee. **C** C00000422

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  
 05 / 27 / 2015

**Transaction ID : A7B9EF6507B9B4C74BA7**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Friends of John Tanner**

Mailing Address PO Box 1398

City State Zip Code  
Union City TN 38281-1398

FEC ID number of contributing federal political committee. **C** C00223230

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  
 06 / 26 / 2015

**Transaction ID : A539718A382B6479BA3B**

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

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

**A. National Cable & Telecommunications Asso**

Full Name (Last, First, Middle Initial)  
Mailing Address 1724 Massachusetts Avenue Nw

City Washington State DC Zip Code 20036-1903

FEC ID number of contributing federal political committee. **C C00010082**

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  
 04 / 30 / 2015

**Transaction ID : A4257878F022C40F6B18**

Amount of Each Receipt this Period  
 1000.00

**B. Sun PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 999 Ponce de Leon Boulevard Suite 625

City Coral Gables State FL Zip Code 33134-3082

FEC ID number of contributing federal political committee. **C C00025346**

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  
 04 / 30 / 2015

**Transaction ID : A0117E331A06C4D9A8A3**

Amount of Each Receipt this Period  
 3000.00

**C. Citizens Organized PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 10100 Santa Monica Blvd Suite 1300

City Los Angeles State CA Zip Code 90067-4114

FEC ID number of contributing federal political committee. **C C00110585**

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  
 06 / 18 / 2015

**Transaction ID : A3D3209A802224837B65**

Amount of Each Receipt this Period  
 5000.00

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

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

9000.00

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

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

FOR LINE NUMBER: PAGE 66 OF 115  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

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

Mailing Address PO Box 3435

City State Zip Code  
Alexandria VA 22302-0435

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

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  
 06 / 24 / 2015

**Transaction ID : AEF09530D3A174A33BC5**

Amount of Each Receipt this Period  
 1000.00

**B. Full Name (Last, First, Middle Initial)**  
**National Air Traffic Controllers Assoc. PAC**

Mailing Address 1325 Massachusetts Ave., NW

City State Zip Code  
Washington DC 20005-4171

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2015

**Transaction ID : AE8C82C1BFDF24322AD6**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1380 NE Miami Gardens Dr #207

City State Zip Code  
Miami FL 33179-4709

FEC ID number of contributing federal political committee. **C C00127811**

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  
 04 / 29 / 2015

**Transaction ID : A6435A993270749DBB77**

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: (check only one)	PAGE 67 OF 115
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**American Pharmacists Assoc.**

Mailing Address 2215 Constitution Avenue, NW

City Washington State DC Zip Code 20037-2907

FEC ID number of contributing federal political committee. **C** C00193854

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  
 06 / 30 / 2015

**Transaction ID : A2AD39B19AF7E4DF4A41**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 800 Connecticut Avenue NW Suite 200

City Washington State DC Zip Code 20006-2720

FEC ID number of contributing federal political committee. **C** C00339291

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  
 06 / 27 / 2015

**Transaction ID : A1D87B98F21604A188ED**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1550 Crystal Drive Crystal Square Two

City Arlington State VA Zip Code 22202-4135

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

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  
 04 / 30 / 2015

**Transaction ID : AACD919A54B904620B42**

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 68 OF 115  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

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

Mailing Address 1501 K Street NW  
Suite 1100

City Washington State DC Zip Code 20005-1410

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AC15763777E24630996**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1N Waukegan Road

City North Chicago State IL Zip Code 60064-1802

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  
 06 / 29 / 2015

**Transaction ID : A6A98792C12734D1A94E**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 555 13th Street  
Suite 600 West

City Washington State DC Zip Code 20004-1109

FEC ID number of contributing federal political committee. **C C00251876**

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  
 06 / 30 / 2015

**Transaction ID : A9C04DFA9F9D3425588F**

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 69 OF 115  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Drive Political Fund**

Mailing Address **25 Louisiana Avenue NW**

City **Washington** State **DC** Zip Code **20001-2130**

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

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  
**06 / 27 / 2015**

**Transaction ID : A26130C58313C40C1824**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address **Worldwide Headquarters  
1932 Wynnton Road**

City **Columbus** State **GA** Zip Code **31999-0001**

FEC ID number of contributing federal political committee. **C C00034157**

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  
**06 / 27 / 2015**

**Transaction ID : A9C86F1F4DB1C4D3BA36**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**The AES Corporation PAC**

Mailing Address **4300 Wilson Blvd**

City **Arlington** State **VA** Zip Code **22203-4167**

FEC ID number of contributing federal political committee. **C C00507962**

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  
**05 / 14 / 2015**

**Transaction ID : A9275F314C6864750A4E**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 115
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 700 West 47th Street  
Suite 1000

City State Zip Code  
Kansas City MO 64112-1805

FEC ID number of contributing federal political committee. **C C00445981**

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  
06 / 27 / 2015

**Transaction ID : AA9516D147881440C836**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address Five Moore Drive

City State Zip Code  
Durham NC 27709-0143

FEC ID number of contributing federal political committee. **C C00199703**

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  
06 / 29 / 2015

**Transaction ID : A24A44B4CB2DF4A0B8C8**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1201 L Street, NW

City State Zip Code  
Washington DC 20005-4024

FEC ID number of contributing federal political committee. **C C00006080**

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  
05 / 25 / 2015

**Transaction ID : A8C1746D663344BCB8AE**

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Verizon Communications Gd Govt**

Mailing Address 1717 Arch Street 47th Fl S

City Philadelphia State PA Zip Code 19103

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2015

**Transaction ID : A03554ADB0E8042AD846**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**McKenna Long & Aldridge LLP**

Mailing Address 303 Peachtree Street Suite 5300

City Atlanta State GA Zip Code 30308-3265

FEC ID number of contributing federal political committee. **C C00391383**

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  
 06 / 27 / 2015

**Transaction ID : A23EE86AD5CCC494584D**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**ELi Lilly And Company PAC**

Mailing Address Lilly Corporate Center Drop Code 1014

City Indianapolis State IN Zip Code 46285-0001

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 Y  
 06 / 25 / 2015

**Transaction ID : AD937EB8EDA904A7C845**

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

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

**A. Renal Physicians Association**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1700 Rockville Pike  
 Suite 220  
 City Rockville State MD Zip Code 20852-1631  
 FEC ID number of contributing federal political committee. **C C00409391**  
 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  
 06 / 27 / 2015  
**Transaction ID : A5A55FF3F2A344827B48**  
 Amount of Each Receipt this Period  
 1000.00

**B. Sanofi US Services Inc. Employees PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 Corporate Drive  
 City Bridgewater State NJ Zip Code 08807-1265  
 FEC ID number of contributing federal political committee. **C C00144345**  
 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  
 06 / 27 / 2015  
**Transaction ID : AC78F578880AC4BCC8B7**  
 Amount of Each Receipt this Period  
 1000.00

**C. Employees Of Northrop Grumman ENGPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 520 S. Grand Ave.  
 Suite 700  
 City Los Angeles State CA Zip Code 90071-2665  
 FEC ID number of contributing federal political committee. **C C00088591**  
 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  
 06 / 27 / 2015  
**Transaction ID : ACB42D71680D84FD18F4**  
 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  
 61750.00



**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 73 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Mailing Address 170 E Post Rd  
Frnt 2

City White Plains State NY Zip Code 10601-4973

Purpose of Disbursement Campaign Consultant

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
04 / 01 / 2015

Amount of Each Disbursement this Period  
3500.00

Transaction ID : BFB68F2D5780A4FD1A92

Full Name (Last, First, Middle Initial)  
**B. At&t Wireless**

Mailing Address PO Box 8220

City Aurora State IL Zip Code 60572-8220

Purpose of Disbursement phone bill

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
04 / 07 / 2015

Amount of Each Disbursement this Period  
134.30

Transaction ID : BF21539ED9C5A4CDAB9C

Full Name (Last, First, Middle Initial)  
**c. Erickson & Co**

Mailing Address 38 Ivy St SE

City Washington State DC Zip Code 20003-4006

Purpose of Disbursement Fundraising Consultant

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
04 / 07 / 2015

Amount of Each Disbursement this Period  
4094.51

Transaction ID : B0E6BDD69F3394BB3B38

**SUBTOTAL** of Disbursements This Page (optional)..... 7728.81

**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 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Jacqueline B Mishler</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2015
Mailing Address 4 The Logging Road		Amount of Each Disbursement this Period 3200.00 <b>Transaction ID : B9A38756E953C4738A4B</b>
City Waccabuc	State NY	
Zip Code 10597-1015	Purpose of Disbursement Fundraising Consultant	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>B. Lori Copland</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 3816 Review Pl Apt 3B		Amount of Each Disbursement this Period 1040.00 <b>Transaction ID : B835500312A3D444DA54</b>
City Bronx	State NY	
Zip Code 10463-2464	Purpose of Disbursement Computer Work	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>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address PO Box 327		Amount of Each Disbursement this Period 4366.15 <b>Transaction ID : B7EC6EC9960AD4C50AC5</b>
City Newark	State NJ	
Zip Code 07101-0327	Purpose of Disbursement Credit Card: See Below	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8606.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. 47th Precinct Community Council</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 08 / 2015</b>
Mailing Address <b>411 Laconia Ave</b>		Amount of Each Disbursement this Period <b>1024.00</b> Transaction ID : <b>BC31021146CE040CF878</b>
City <b>Bronx</b> State <b>NY</b> Zip Code <b>10466-0000</b>	Purpose of Disbursement <b>Journal ad &amp; Tickets</b>	
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>B. Westchester Young Democrats</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 08 / 2015</b>
Mailing Address <b>170 East Post Road</b>		Amount of Each Disbursement this Period <b>250.00</b> Transaction ID : <b>B9971EC77C2A441C8A4C</b>
City <b>White Plains</b> State <b>NY</b> Zip Code <b>10601-4909</b>	Purpose of Disbursement <b>Journal ad</b>	
Candidate Name <b>Westchester Young Democrats</b>	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>c. Cablevision</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 14 / 2015</b>
Mailing Address <b>Story Ave</b>		Amount of Each Disbursement this Period <b>419.24</b> Transaction ID : <b>B7C82BD479E224189B74</b>
City <b>Bronx</b> State <b>NY</b> Zip Code <b>10458-0000</b>	Purpose of Disbursement <b>Cable Service</b>	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1693.24</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Yonkers Democratic Chairman's Trust</b>			Date of Disbursement M M / D D / Y Y Y Y <b>04 / 17 / 2015</b>
Mailing Address <b>955 Yonkers Avenue</b>			Amount of Each Disbursement this Period <b>500.00</b> Transaction ID : <b>B9CBD95D11F704C02ACD</b>
City <b>Yonkers</b>	State <b>NY</b>	Zip Code <b>10704-3060</b>	
Purpose of Disbursement <b>tickets</b>		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Choice Matters - Westchester Coalition for Legal Abortion</b>			Date of Disbursement M M / D D / Y Y Y Y <b>04 / 30 / 2015</b>
Mailing Address <b>237 Mamaroneck Avenue</b>			Amount of Each Disbursement this Period <b>2000.00</b> Transaction ID : <b>B74CD1F19410C44E7966</b>
City <b>White Plains</b>	State <b>NY</b>	Zip Code <b>10605-1319</b>	
Purpose of Disbursement <b>Journal ad &amp; Tickets</b>		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. American Express</b>			Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2015</b>
Mailing Address <b>PO Box 327</b>			Amount of Each Disbursement this Period <b>1698.04</b> Transaction ID : <b>BE3A1ABA49197495491D</b>
City <b>Newark</b>	State <b>NJ</b>	Zip Code <b>07101-0327</b>	
Purpose of Disbursement <b>Credit Card: See Below</b>		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4198.04</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

**A. Strategic Services**

Full Name (Last, First, Middle Initial)  
Mailing Address 170 E Post Rd  
Frnt 2

City White Plains State NY Zip Code 10601-4973

Purpose of Disbursement Campaign Consultant

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 05 / 01 / 2015

Amount of Each Disbursement this Period: 3500.00

Transaction ID : BF9849F5474454B42BDC

**B. William Weitz**

Full Name (Last, First, Middle Initial)  
Mailing Address 3515 Henry Hudson Pkwy

City Bronx State NY Zip Code 10463-1326

Purpose of Disbursement Reimbursement - parking, lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 05 / 01 / 2015

Amount of Each Disbursement this Period: 317.00

Transaction ID : B695D01CB22654040B95

**c. Jacqueline B Mishler**

Full Name (Last, First, Middle Initial)  
Mailing Address 4 The Logging Road

City Waccabuc State NY Zip Code 10597-1015

Purpose of Disbursement Fundraising Consultant

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 05 / 01 / 2015

Amount of Each Disbursement this Period: 3200.00

Transaction ID : BC4658D962FF14D8F980

**SUBTOTAL** of Disbursements This Page (optional) ..... 7017.00

**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 78 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. William Weitz</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 3515 Henry Hudson Pkwy		Amount of Each Disbursement this Period 175.00 <b>Transaction ID : B7B49C3C4067C49BAA40</b>
City Bronx	State NY	
Zip Code 10463-1326	Purpose of Disbursement Reimbursement - postage	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>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address PO Box 327		Amount of Each Disbursement this Period 1335.26 <b>Transaction ID : B2A8B1EE0EB4742C1A30</b>
City Newark	State NJ	
Zip Code 07101-0327	Purpose of Disbursement Credit Card: See Below	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>C. New Rochelle Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 28 Trenor Drive		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : B4BD19CBA1F394D6282E</b>
City New Rochelle	State NY	
Zip Code 10804-3719	Purpose of Disbursement Dinner & Journal Ad	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2510.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Ben Franklin Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 304 West 231st Street		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : BCDADBE2935804E36A24</b>
City Bronx	State NY	
Zip Code 10463-3805	Purpose of Disbursement Rent	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>B. Ben Franklin Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 304 West 231st Street		Amount of Each Disbursement this Period 1575.00 <b>Transaction ID : BE89F67E3FAB344C4BB1</b>
City Bronx	State NY	
Zip Code 10463-3805	Purpose of Disbursement Dinner & Journal Ad	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>c. Lori Copland</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 3816 Review Pl Apt 3B		Amount of Each Disbursement this Period 1020.00 <b>Transaction ID : B30C8CDD87516462E9F6</b>
City Bronx	State NY	
Zip Code 10463-2464	Purpose of Disbursement Computer Work	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4595.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Jewish War Veterans</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 3530 Henry Hudson Pkwy		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : B8309357E2B9544FE96A</b>
City Bronx	State NY	
Purpose of Disbursement Journal ad	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>B. All Islands Association</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address PO Box 2099		Amount of Each Disbursement this Period 265.00 <b>Transaction ID : B409D2D99A03E439688C</b>
City Mount Vernon	State NY	
Purpose of Disbursement Dinner & Journal Ad	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>c. Co-op City Scholarship Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address Dreiser Loop		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : B72D17FDB06DB4FE3B8F</b>
City Bronx	State NY	
Purpose of Disbursement Dinner tickets	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1015.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Hudson River Community Association</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address PO Box 866		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : BBAF286FD78CE4F708CD</b>
City Yonkers	State NY	
Zip Code 10702-0866	Purpose of Disbursement Journal ad	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>B. Bronx Arts Ensemble</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address Golf Hous		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : B56903111FCEA4F04836</b>
City Bronx	State NY	
Zip Code 10471-0000	Purpose of Disbursement Journal Ad	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>c. Loria &amp; Sons</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 1876 Central Park Ave		Amount of Each Disbursement this Period 723.40 <b>Transaction ID : B484D1377367146F4A83</b>
City Yonkers	State NY	
Zip Code 10710-2901	Purpose of Disbursement trophies	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1423.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Williamsbridge NAACP</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 680 E 219th St			Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : BE89BCCB747C34F328A8</b>
City Bronx	State NY	Zip Code 10467-5304	
Purpose of Disbursement Journal ad & tickets		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>B. Williamsbridge Club NANBPWC</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address White Plains Rd			Amount of Each Disbursement this Period 325.00 <b>Transaction ID : B5F91FA3F2A3E485D96C</b>
City Bronx	State NY	Zip Code 10461-0000	
Purpose of Disbursement Dinner & Journal Ad		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>c. Eliot L. Engel</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 3725 Henry Hudson Pkwy			Amount of Each Disbursement this Period 250.00 <b>Transaction ID : B965FE39D1F0444328A1</b>
City Bronx	State NY	Zip Code 10463-1527	
Purpose of Disbursement Reimbursement - postage, parking, 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: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1575.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Blue Bay Diner</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 3533 Johnson Ave		Amount of Each Disbursement this Period 75.97 <b>Transaction ID : B963066C6089D4C2C9B6</b>
City Bronx	State NY	
Zip Code 10463-1602	Purpose of Disbursement Lunch with consultant	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>B. Friends Of Maureen Walker</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 322 Langdon Avenue		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : B6180F402160342B2875</b>
City Mount Vernon	State NY	
Zip Code 10553-1723	Purpose of Disbursement tickets	Category/ Type
Candidate Name <b>Friends Of Maureen Walker</b>	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>c. Erickson &amp; Co</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 38 Ivy St SE		Amount of Each Disbursement this Period 4307.25 <b>Transaction ID : B27840F7FF49B4E4DB31</b>
City Washington	State DC	
Zip Code 20003-4006	Purpose of Disbursement Fundraising Consultant	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4633.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Mt. Vernon Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 20 / 2015</b>
Mailing Address <b>1 Park Ave</b>		Amount of Each Disbursement this Period <b>1100.00</b> Transaction ID : <b>B2EF5524307644E96959</b>
City <b>Mount Vernon</b> State <b>NY</b> Zip Code <b>10550-2200</b>	Purpose of Disbursement <b>Journal ad &amp; Tickets</b>	
Candidate Name <b>Mt. Vernon Democratic Committee</b>		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>B. Retirees of Dreiser Loop</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 26 / 2015</b>
Mailing Address <b>Dreiser Loop</b>		Amount of Each Disbursement this Period <b>200.00</b> Transaction ID : <b>B34FEBAC91CA34E9F899</b>
City <b>Bronx</b> State <b>NY</b> Zip Code <b>10475</b>	Purpose of Disbursement <b>Humanitarian Committee journal ad</b>	
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>c. Lori Copland</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 26 / 2015</b>
Mailing Address <b>3816 Review Pl Apt 3B</b>		Amount of Each Disbursement this Period <b>780.00</b> Transaction ID : <b>B88137DD19FFE498BA7E</b>
City <b>Bronx</b> State <b>NY</b> Zip Code <b>10463-2464</b>	Purpose of Disbursement <b>Computer Work</b>	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2080.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Jason Steinbaum</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 1821 MacArthur Dr		Amount of Each Disbursement this Period 210.74 <b>Transaction ID : BF03759EA96194D09844</b>
City Mc Lean	State VA	
Zip Code 22101-5334	Purpose of Disbursement Reimbursement - 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) <b>B. American Legion Bronx County</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address W 238th St		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : B2F094C1B436E4D01A9F</b>
City Bronx	State NY	
Zip Code 10463-0000	Purpose of Disbursement Journal Ad	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>C. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1800.00 <b>Transaction ID : BBEDDAB6FACF746ABB14</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Campaign software 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2260.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. At&amp;t Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address PO Box 8220		Amount of Each Disbursement this Period 218.27 <b>Transaction ID : BA1D770345A5C4C78986</b>
City Aurora	State IL	
Zip Code 60572-8220	Purpose of Disbursement phone bill	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>B. Throggs Neck Community Service</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 550 Balcom Ave		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : B777FBDF5AF9647978CB</b>
City Bronx	State NY	
Zip Code 10465-2601	Purpose of Disbursement Journal Ad	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>c. Strategic Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 170 E Post Rd Frnt 2		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : B8C3415D48E814C5BAAC</b>
City White Plains	State NY	
Zip Code 10601-4973	Purpose of Disbursement Campaign Consultant	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4218.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 115		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Ernie Davis</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 04 / 2015</b>
Mailing Address <b>Po Box 2197</b>		Amount of Each Disbursement this Period <b>500.00</b> Transaction ID : <b>B76E68B193388436AB23</b>
City <b>Mount Vernon</b>	State <b>NY</b>	
Zip Code <b>10551-2197</b>	Purpose of Disbursement <b>Tickets</b>	Category/ Type
Candidate Name <b>Friends of Ernie Davis</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Erickson &amp; Co</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 11 / 2015</b>
Mailing Address <b>38 Ivy St SE</b>		Amount of Each Disbursement this Period <b>4886.57</b> Transaction ID : <b>BC5ACD55E192449B6A8C</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20003-4006</b>	Purpose of Disbursement <b>Fundraising Consultant</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jacqueline B Mishler</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 11 / 2015</b>
Mailing Address <b>4 The Logging Road</b>		Amount of Each Disbursement this Period <b>3200.00</b> Transaction ID : <b>B9724E06657C049AF999</b>
City <b>Waccabuc</b>	State <b>NY</b>	
Zip Code <b>10597-1015</b>	Purpose of Disbursement <b>Fundraising Consultant</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>8586.57</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2015
Mailing Address PO Box 327		Amount of Each Disbursement this Period 2691.03 <b>Transaction ID : B0BB74A57489C44BFB3D</b>
City Newark	State NJ Zip Code 07101-0327	
Purpose of Disbursement Credit Card: See Below		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>B. Cablevision</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address Story Ave		Amount of Each Disbursement this Period 169.85 <b>Transaction ID : BDA46505FBC6F4BF4B27</b>
City Bronx	State NY Zip Code 10458-0000	
Purpose of Disbursement Cable Service		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>c. Branford Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address 2 Grace Ct		Amount of Each Disbursement this Period 69.64 <b>Transaction ID : BB80A17005EBE473E96A</b>
City Brooklyn	State NY Zip Code 11201-4184	
Purpose of Disbursement printing		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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2930.52
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address 140 West St		Amount of Each Disbursement this Period 248.34 <b>Transaction ID : B58A57E9283554B74863</b>
City New York	State NY	
Zip Code 10007-2141	Purpose of Disbursement Phone bill	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>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address 140 West St		Amount of Each Disbursement this Period 777.92 <b>Transaction ID : B6483E4A2AD494B38A4D</b>
City New York	State NY	
Zip Code 10007-2141	Purpose of Disbursement Phone bill	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>c. Cablevision</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address Story Ave		Amount of Each Disbursement this Period 209.64 <b>Transaction ID : B4321CA47B1CC4A23879</b>
City Bronx	State NY	
Zip Code 10458-0000	Purpose of Disbursement Cable Service	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1235.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 115			
	<input checked="" type="checkbox"/> 17 <input 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)  
**Engel for Congress**

**A. At&t Wireless**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 8220

City Aurora State IL Zip Code 60572-8220

Purpose of Disbursement phone bill

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 06 / 13 / 2015

Amount of Each Disbursement this Period: 126.51

Transaction ID : BADA35E0FF2204581BDB

**B. Strategic Services**

Full Name (Last, First, Middle Initial)  
Mailing Address 170 E Post Rd Frnt 2

City White Plains State NY Zip Code 10601-4973

Purpose of Disbursement Reimbursement - meal with consultant

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 06 / 15 / 2015

Amount of Each Disbursement this Period: 108.83

Transaction ID : B5BD7790D5B09445C8A5

**C. Westchester County Democratic Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 170 East Post Road

City White Plains State NY Zip Code 10601-4909

Purpose of Disbursement Journal ad & Tickets

Candidate Name Westchester County Democratic Committee

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 06 / 18 / 2015

Amount of Each Disbursement this Period: 5000.00

Transaction ID : BD1E08F11961042DD8E7

**SUBTOTAL** of Disbursements This Page (optional)..... 5235.34

**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 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. National Action Comm - NACPAC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 19 / 2015</b>
Mailing Address <b>500 E Broward Blvd 18th Floor</b>		Amount of Each Disbursement this Period <b>1800.00</b>
City <b>Fort Lauderdale</b> State <b>FL</b> Zip Code <b>33394-3000</b>	Purpose of Disbursement <b>Membership dues</b>	<b>Transaction ID : B65BD044A6D8C40C385E</b>
Candidate Name <b>National Action Comm - NACPAC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. National Council Of Negro Women</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2015</b>
Mailing Address <b>4035 White Plains Rd</b>		Amount of Each Disbursement this Period <b>1000.00</b>
City <b>Bronx</b> State <b>NY</b> Zip Code <b>10466-3003</b>	Purpose of Disbursement <b>Journal ad</b>	<b>Transaction ID : BD638F2CB6652448A97D</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2015</b>
Mailing Address <b>Broadway</b>		Amount of Each Disbursement this Period <b>59.82</b>
City <b>Bronx</b> State <b>NY</b> Zip Code <b>10463</b>	Purpose of Disbursement <b>gas</b>	<b>Transaction ID : B707247BF47E84C0B9A5</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
Disbursement For: <b>2016</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2800.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015	
Mailing Address Broadway			Amount of Each Disbursement this Period 65.82	
City Bronx	State NY	Zip Code 10463	Transaction ID : <b>B7B2E49A21CB84301855</b>	
Purpose of Disbursement gas		Category/ Type	[MEMO ITEM]	
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>B. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015	
Mailing Address Broadway			Amount of Each Disbursement this Period 10.03	
City Bronx	State NY	Zip Code 10463	Transaction ID : <b>B36787953B19E4529BFC</b>	
Purpose of Disbursement gas		Category/ Type	[MEMO ITEM]	
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>c. Liebman's Deli</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015	
Mailing Address 552 W 235th St			Amount of Each Disbursement this Period 78.08	
City Bronx	State NY	Zip Code 10463-1709	Transaction ID : <b>BCF4E60006414ACEA33</b>	
Purpose of Disbursement Lunch with consultants		Category/ Type	[MEMO ITEM]	
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:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Eliot L. Engel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 3725 Henry Hudson Pkwy		Amount of Each Disbursement this Period 811.18 <b>Transaction ID : B74EE67FAC66F418C84C</b>
City Bronx	State NY	
Purpose of Disbursement Reimbursement: See Below		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>B. Sears &amp; Robuck</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address Cross County Boulevard		Amount of Each Disbursement this Period 243.78 <b>Transaction ID : BBA27A3A72B98431AAD2</b> <b>[MEMO ITEM]</b>
City Yonkers	State NY	
Purpose of Disbursement Campaign office supplies		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>c. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 238 W & Broad Way		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : BA567BB6B83A94E818AC</b> <b>[MEMO ITEM]</b>
City Bronx	State NY	
Purpose of Disbursement gas		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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	811.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address PO Box 327		Amount of Each Disbursement this Period 2392.82 <b>Transaction ID : B81EBA4AA844D49C585D</b>
City Newark	State NJ Zip Code 07101-0327	
Purpose of Disbursement Credit Card: See Below	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>B. Green Terminal LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 3010 Riverdale Ave		Amount of Each Disbursement this Period 59.20 <b>Transaction ID : B93F58D812F654EC8ABB</b> <b>[MEMO ITEM]</b>
City Bronx	State NY Zip Code 10463-3620	
Purpose of Disbursement gas	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>c. Green Terminal LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 3010 Riverdale Ave		Amount of Each Disbursement this Period 57.98 <b>Transaction ID : B684DC443CD7D421AB5B</b> <b>[MEMO ITEM]</b>
City Bronx	State NY Zip Code 10463-3620	
Purpose of Disbursement gas	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2392.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Costco Wholesalers</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address Stew Leonard Dr		Amount of Each Disbursement this Period 243.75
City Yonkers	State NY	
Zip Code 10701-0000	Purpose of Disbursement stamps	Transaction ID : <b>BD8C588D5AC224B4E89A</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Blue Bay Diner</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 3533 Johnson Ave		Amount of Each Disbursement this Period 74.31
City Bronx	State NY	
Zip Code 10463-1602	Purpose of Disbursement Dinner with Consultants	Transaction ID : <b>B8EE6ADBD9E41483194A</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Green Terminal LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 3010 Riverdale Ave		Amount of Each Disbursement this Period 64.74
City Bronx	State NY	
Zip Code 10463-3620	Purpose of Disbursement gas	Transaction ID : <b>BB7A826C9654B4B079BE</b>
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)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 140 West St			Amount of Each Disbursement this Period 284.72
City New York	State NY	Zip Code 10007-2141	
Purpose of Disbursement Phone service		Category/ Type	<b>Transaction ID : B24251220A35946E796B</b>
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)		<b>[MEMO ITEM]</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. American Express</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address PO Box 327			Amount of Each Disbursement this Period 1083.66
City Newark	State NJ	Zip Code 07101-0327	
Purpose of Disbursement Credit Card: See Below		Category/ Type	<b>Transaction ID : B60EEE341A07642658F3</b>
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>c. Shell Oil</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address Broadway			Amount of Each Disbursement this Period 59.44
City Bronx	State NY	Zip Code 10463	
Purpose of Disbursement gas		Category/ Type	<b>Transaction ID : B5EECF2E6C1594C759B1</b>
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)		<b>[MEMO ITEM]</b>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1083.66
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address Broadway		Amount of Each Disbursement this Period 62.58
City Bronx	State NY	
Zip Code 10463	Purpose of Disbursement gas	Transaction ID : <b>BDD6E7F84E2A643DDA2A</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 140 West St		Amount of Each Disbursement this Period 363.23
City New York	State NY	
Zip Code 10007-2141	Purpose of Disbursement Phone service	Transaction ID : <b>B336D630880024D77A9C</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address Broadway		Amount of Each Disbursement this Period 61.00
City Bronx	State NY	
Zip Code 10463	Purpose of Disbursement gas	Transaction ID : <b>B3E925E32F7DF461E957</b>
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)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. American Express</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address PO Box 327			Amount of Each Disbursement this Period 908.19 <b>Transaction ID : BC0BFE060DB3A4FD597B</b>
City Newark	State NJ	Zip Code 07101-0327	
Purpose of Disbursement Credit Card: See Below		Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Sunoco</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 238 W & Broad Way			Amount of Each Disbursement this Period 60.04 <b>Transaction ID : BAEA21836A0EC479E9CD</b> <b>[MEMO ITEM]</b>
City Bronx	State NY	Zip Code 10463-0000	
Purpose of Disbursement gas		Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Sun Corners Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address WEST 230th & Irwin Ave			Amount of Each Disbursement this Period 61.28 <b>Transaction ID : BC1B1F72CDB3F4345AC5</b> <b>[MEMO ITEM]</b>
City Bronx	State NY	Zip Code 10463-0000	
Purpose of Disbursement gas		Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	908.19
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Sun Corners Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address WEST 230th & Irwin Ave		Amount of Each Disbursement this Period 63.62
City Bronx	State NY	
Zip Code 10463-0000	Purpose of Disbursement gas	Transaction ID : <b>BBB22C1C0EB1D46ABADF</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 140 West St		Amount of Each Disbursement this Period 284.72
City New York	State NY	
Zip Code 10007-2141	Purpose of Disbursement Phone service	Transaction ID : <b>BB26594B4110E4772B14</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Pizza Chef</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address Johnson Ave		Amount of Each Disbursement this Period 79.50
City Bronx	State NY	
Zip Code 10463-0000	Purpose of Disbursement Lunch for volunteers	Transaction ID : <b>BA508AFA36CB64EB7A61</b>
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)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address PO Box 327		Amount of Each Disbursement this Period 2432.93 <b>Transaction ID : B1D4B17C6398F48DAB83</b>
City Newark	State NJ Zip Code 07101-0327	
Purpose of Disbursement Credit Card: See Below		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>B. Green Terminal LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 3010 Riverdale Ave		Amount of Each Disbursement this Period 62.43 <b>Transaction ID : B27BA8FBAB9494718A12</b>
City Bronx	State NY Zip Code 10463-3620	
Purpose of Disbursement gas		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>c. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 140 West St		Amount of Each Disbursement this Period 323.23 <b>Transaction ID : B7316E9647D614B7C86B</b>
City New York	State NY Zip Code 10007-2141	
Purpose of Disbursement Phone service		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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2432.93
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Costco Wholesalers</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address Stew Leonard Dr		Amount of Each Disbursement this Period 53.28
City Yonkers	State NY Zip Code 10701-0000	
Purpose of Disbursement gas	Category/Type	Transaction ID : <b>BBF14F0302FEE47B38CE</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Riverdale Florist</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 210 West 231st Street		Amount of Each Disbursement this Period 268.56
City Bronx	State NY Zip Code 10463-5302	
Purpose of Disbursement Flowers	Category/Type	Transaction ID : <b>BF5CDED5FCEEA4B3D84D</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Costco Wholesalers</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address Stew Leonard Dr		Amount of Each Disbursement this Period 243.75
City Yonkers	State NY Zip Code 10701-0000	
Purpose of Disbursement stamps	Category/Type	Transaction ID : <b>BAD53E32EA5A44748BF5</b>
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)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

**A. Shell Oil**

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

City Bronx State NY Zip Code 10463

Purpose of Disbursement gas

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 08 / 2015

Amount of Each Disbursement this Period: 64.43

Transaction ID : BC439AB2C282E4269854

[MEMO ITEM]

**B. Blue Bay Diner**

Full Name (Last, First, Middle Initial)  
Mailing Address 3533 Johnson Ave

City Bronx State NY Zip Code 10463-1602

Purpose of Disbursement Dinner with consultants

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 08 / 2015

Amount of Each Disbursement this Period: 98.01

Transaction ID : B8E531050067B419696F

[MEMO ITEM]

**c. Riverdale Florist**

Full Name (Last, First, Middle Initial)  
Mailing Address 210 West 231st Street

City Bronx State NY Zip Code 10463-5302

Purpose of Disbursement Flowers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 08 / 2015

Amount of Each Disbursement this Period: 293.81

Transaction ID : BCF4C13F4CE394BF9AC2

[MEMO ITEM]

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 140 West St		Amount of Each Disbursement this Period 384.60
City New York	State NY	
Zip Code 10007-2141	Purpose of Disbursement Phone service	Transaction ID : <b>BB8FBF78CC7734951B11</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Exxon Mobil Gas</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address Irwin Ave		Amount of Each Disbursement this Period 54.35
City Bronx	State NY	
Zip Code 10463-0000	Purpose of Disbursement gas	Transaction ID : <b>BEAD344BB715848A3A6B</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Exxon Mobil Gas</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address Irwin Ave		Amount of Each Disbursement this Period 61.00
City Bronx	State NY	
Zip Code 10463-0000	Purpose of Disbursement gas	Transaction ID : <b>BEABD25778D6F468DBC5</b>
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)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Riverdale Florist</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 210 West 231st Street		Amount of Each Disbursement this Period 293.81
City Bronx	State NY	
Zip Code 10463-5302	Purpose of Disbursement Flowers	Transaction ID : <b>BBD9FA1A6C04C4F2DA71</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Eliot L. Engel</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 3725 Henry Hudson Pkwy		Amount of Each Disbursement this Period 2227.34
City Bronx	State NY	
Zip Code 10463-1527	Purpose of Disbursement Reimbursement - See Below	Transaction ID : <b>BA70D9903119741ED8FE</b>
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>c. Liebman's Deli</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 552 W 235th St		Amount of Each Disbursement this Period 9.00
City Bronx	State NY	
Zip Code 10463-1709	Purpose of Disbursement food	Transaction ID : <b>BE2D47D4CC9B24F1B9C5</b>
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)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2227.34
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 115	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. At&amp;t Wireless</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address PO Box 8220		Amount of Each Disbursement this Period 344.78
City Aurora	State IL	
Zip Code 60572-8220	Purpose of Disbursement phone bill	Transaction ID : <b>BF47F0CBDB2C449CE81D</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jetblue</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address Lga Airp		Amount of Each Disbursement this Period 849.56
City Flushing	State NY	
Zip Code 11371-0000	Purpose of Disbursement airplane tickets	Transaction ID : <b>B8358288C0622493F890</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. EZ Rent a Car</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address 600 Terminal Dr		Amount of Each Disbursement this Period 226.03
City Ft Lauderdale	State FL	
Zip Code 33315-3618	Purpose of Disbursement car rental	Transaction ID : <b>BCBCFD0BDAA17400E8E7</b>
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)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Exxon Mobil Gas</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address Irwin Ave		Amount of Each Disbursement this Period 23.00
City Bronx	State NY	
Zip Code 10463-0000	Purpose of Disbursement gas	Transaction ID : B20360BF3CFE541A0AA1
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Neptune Diner</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address Astoria Blvd Quee 10		Amount of Each Disbursement this Period 27.15
City	State	
Zip Code 0000	Purpose of Disbursement Lunch with consultant	Transaction ID : B27B953210E404FE688B
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address PO Box 327		Amount of Each Disbursement this Period 2135.91
City Newark	State NJ	
Zip Code 07101-0327	Purpose of Disbursement Credit Card: See Below	Transaction ID : B7D2C27BBC4E04944877
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2135.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 115	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Neptune Diner</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address Astoria Blvd Quee 10		Amount of Each Disbursement this Period 140.25
City	State Zip Code 0000	
Purpose of Disbursement Dinner with Consultants	Candidate Name	Transaction ID : <b>BC9F6AD85B7BF4506966</b>
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:	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. Pizza Chef</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address Johnson Ave		Amount of Each Disbursement this Period 61.73
City	State Zip Code NY 10463-0000	
Purpose of Disbursement Lunch for volunteers	Candidate Name	Transaction ID : <b>B5AF8A65164C14362841</b>
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:	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>c. Liebman's Deli</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address 552 W 235th St		Amount of Each Disbursement this Period 98.97
City	State Zip Code NY 10463-1709	
Purpose of Disbursement Lunch with Consultants	Candidate Name	Transaction ID : <b>BDBD1A76CF56E450ABB5</b>
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:	<b>[MEMO ITEM]</b>

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Liebman's Deli</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address 552 W 235th St		Amount of Each Disbursement this Period 82.43
City Bronx	State NY	
Zip Code 10463-1709	Purpose of Disbursement Lunch with consultants	Transaction ID : <b>B9A0C8D9537C64087BB4</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Costco Wholesalers</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address Stew Leonard Dr		Amount of Each Disbursement this Period 363.65
City Yonkers	State NY	
Zip Code 10701-0000	Purpose of Disbursement Membership and stamps	Transaction ID : <b>BBD47C1122D664A75A8A</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Generico's Pizzeria</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address Riverdale Ave		Amount of Each Disbursement this Period 79.10
City Bronx	State NY	
Zip Code 10463-0000	Purpose of Disbursement Lunch with Consultants	Transaction ID : <b>B20F0FCA1B3CD4B678ED</b>
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)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Sun Corners Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address WEST 230th & Irwin Ave		Amount of Each Disbursement this Period 64.78
City Bronx	State NY	
Zip Code 10463-0000	Purpose of Disbursement gas	Transaction ID : BC9217CB30D62431E809
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address 140 West St		Amount of Each Disbursement this Period 363.28
City New York	State NY	
Zip Code 10007-2141	Purpose of Disbursement Phone service	Transaction ID : BEB7D979C9C6C46E8BF1
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Blue Bay Diner</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address 3533 Johnson Ave		Amount of Each Disbursement this Period 78.19
City Bronx	State NY	
Zip Code 10463-1602	Purpose of Disbursement Dinner with consultants	Transaction ID : B6849B3FA95EC479DB66
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)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 115	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. BJ's Wholesale</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address 825 Pelham		Amount of Each Disbursement this Period 243.75
City Pelham	State NY	
Zip Code 10803-2710	Purpose of Disbursement stamps	Transaction ID : <b>B532798A3981F442AB72</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Riverdale Florist</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2015
Mailing Address 210 West 231st Street		Amount of Each Disbursement this Period 220.50
City Bronx	State NY	
Zip Code 10463-5302	Purpose of Disbursement Flowers	Transaction ID : <b>BF50D23433EC54581884</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2015
Mailing Address PO Box 327		Amount of Each Disbursement this Period 702.75
City Newark	State NJ	
Zip Code 07101-0327	Purpose of Disbursement Credit Card: See Below	Transaction ID : <b>BA9AFB83C49FF4A6CAA7</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	702.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Costco Wholesalers</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2015
Mailing Address Stew Leonard Dr		Amount of Each Disbursement this Period 56.21
City Yonkers	State NY	
Zip Code 10701-0000	Purpose of Disbursement gas	Transaction ID : B4FF3E483E2194FD6A3C
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Pizza Chef</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2015
Mailing Address Johnson Ave		Amount of Each Disbursement this Period 82.70
City Bronx	State NY	
Zip Code 10463-0000	Purpose of Disbursement Lunch for volunteers	Transaction ID : B19602F2EDD174259B65
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Riverdale Florist</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2015
Mailing Address 210 West 231st Street		Amount of Each Disbursement this Period 293.81
City Bronx	State NY	
Zip Code 10463-5302	Purpose of Disbursement Flowers	Transaction ID : BF85EE0878DB646E99BD
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)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 115			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Sun Corners Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 07 / 2015</b>
Mailing Address <b>WEST 230th &amp; Irwin Ave</b>		Amount of Each Disbursement this Period <b>65.68</b>
City <b>Bronx</b> State <b>NY</b> Zip Code <b>10463-0000</b>	Category/Type	
Purpose of Disbursement <b>gas</b>	Candidate Name	<b>Transaction ID : B766EFE0EC3694EE68C8</b> <b>[MEMO ITEM]</b>
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>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/Type	
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) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>87037.24</b>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 115	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Mary-Jane Shimsky</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2015</b>
Mailing Address <b>PO Box 266</b>		Amount of Each Disbursement this Period <b>250.00</b> <b>Transaction ID : B5B839275D01D4C748A8</b>
City <b>Hastings On Hudson</b> State <b>NY</b> Zip Code <b>10706-0266</b>	Purpose of Disbursement <b>Non-Federal Contribution</b>	
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>B. People for Ken Jenkins</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 16 / 2015</b>
Mailing Address <b>PO Box 192</b>		Amount of Each Disbursement this Period <b>250.00</b> <b>Transaction ID : B299080322F674A2E90A</b>
City <b>Yonkers</b> State <b>NY</b> Zip Code <b>10710-0192</b>	Purpose of Disbursement <b>Non-Federal Contribution</b>	
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>c. Citizens for Boyle</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 19 / 2015</b>
Mailing Address <b>PO Box 111545</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : BA02DB0C3DB6C4904A76</b>
City <b>Philadelphia</b> State <b>PA</b> Zip Code <b>19116</b>	Purpose of Disbursement <b>Contribution for PA13</b>	
Candidate Name <b>Hon. Brendan Boyle</b>	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: <b>PA</b> District: <b>13</b>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 115			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Vinnie For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2015
Mailing Address 41 Challenger Drive		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : B8E2BB1D664474CD1B3E</b>
City Staten Island	State NY	
Zip Code 10312-1564	Purpose of Disbursement Contribution to NY11	Category/ Type
Candidate Name <b>Hon. Vinnie Gentile</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: NY	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Friends of Ben Boykin</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 10 Stewart Place		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : B166D6614FC104911BFB</b>
City White Plains	State NY	
Zip Code 10603-3800	Purpose of Disbursement Non-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	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. DCCC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2015
Mailing Address 430 S. Capitol St. Se		Amount of Each Disbursement this Period 10000.00 <b>Transaction ID : B643EB29610DF4C6FB98</b>
City Washington	State DC	
Zip Code 20003-4024	Purpose of Disbursement Unlimited transfer to National Party	Category/ Type
Candidate Name <b>DCCC</b>	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	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 115	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Christopher Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 17 / 2015</b>
Mailing Address Central Park Avenue		Amount of Each Disbursement this Period <b>250.00</b> <b>Transaction ID : B8376F47479874D448FD</b>
City Yonkers	State NY Zip Code 10701	
Purpose of Disbursement Non-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) <b>B. DCCC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 27 / 2015</b>
Mailing Address 430 S. Capitol St. Se		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : BF7F3C96D337D485DA1C</b>
City Washington	State DC Zip Code 20003-4024	
Purpose of Disbursement Unlimited transfer to National Party	Category/Type	
Candidate Name <b>DCCC</b>		
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>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>18000.00</b>