

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

TOM REED FOR CONGRESS

ADDRESS (number and street)

PO BOX 10847

Check if different than previously reported. (ACC)

ROCHESTER

NY

14610-0847

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00464032

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

NY

23

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

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 2019

through

M M /

D D /

Y Y Y Y 2019

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

KILGORE, PAUL, , ,

Type or Print Name of Treasurer

KILGORE, PAUL, , ,

Signature of Treasurer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2019

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

Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
TOM REED FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	446609.00	653594.00
(b) Total Contribution Refunds (from Line 20(d))	900.00	925.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	445709.00	652669.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	294116.64	599918.48
(b) Total Offsets to Operating Expenditures (from Line 14).....	2490.34	3705.04
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	291626.30	596213.44
8. Cash on Hand at Close of Reporting Period (from Line 27).....		
	471328.55	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
	0.00	
10. Debts and Obligations Owed BY 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 05/2016)

Write or Type Committee Name

TOM REED FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2019 To: M M / D D / Y Y Y Y 06 / 30 / 2019

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).....	161440.00	278565.00
(ii) Unitemized	8169.00	9279.00
(iii) TOTAL of contributions from individuals	169609.00	287844.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	277000.00	365750.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	446609.00	653594.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	54631.68	201017.63
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.)	2490.34	3705.04
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.28
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	503731.02	858316.95

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 150

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	294116.64	599918.48
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	4797.00	4797.00
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	650.00	675.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	250.00	250.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	900.00	925.00
21. OTHER DISBURSEMENTS	5350.00	5350.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	305163.64	610990.48

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	272761.17
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	503731.02
25. SUBTOTAL (add Line 23 and Line 24).....	776492.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	305163.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	471328.55

**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 150
(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)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ADREAN, LEE, , ,
Mailing Address 744 CONWAY GLEN DRIVE NW

City ATLANTA State GA Zip Code 30327-3601

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 28 2019

Transaction ID : **AF527EE6D5A9F49059FD**

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ANDERSON, CAROL, H., ,
Mailing Address 1025 STRONG RD

City VICTOR State NY Zip Code 14564-9124

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 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 2019

Transaction ID : **A7058CEF16F514014AE3**

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BERNSTEIN, GENE, , ,
Mailing Address 31 SOUTH HILL STREET

City SOUTHAMPTON State NY Zip Code 11968

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

Name of Employer NORTHVILLE INDUSTRIES Occupation EXECUTIVE

Receipt For: 2020
 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 2019

Transaction ID : **A71647543AC4841FCA48**

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

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

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

_____ 3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 150	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BLOOM, BRADLEY, , ,

Mailing Address 11 ALBION ROAD

City WELLESLEY	State MA	Zip Code 02481-1304
-------------------	-------------	------------------------

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

Name of Employer BERKSHIRE PARTNERS	Occupation MANAGING DIRECTOR
--	---------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2019

Transaction ID : **A752C1524CCC7413FAEA**

Amount of Each Receipt this Period

2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BLOOM, BRADLEY, , ,

Mailing Address 11 ALBION ROAD

City WELLESLEY	State MA	Zip Code 02481-1304
-------------------	-------------	------------------------

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

Name of Employer BERKSHIRE PARTNERS	Occupation MANAGING DIRECTOR
--	---------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2019

Transaction ID : **A430A41E43C2C45879C8**

Amount of Each Receipt this Period

2800.00

Memo Item

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

Mailing Address 8904 MAGNOLIA HEIGHTS CT

City CHAROTTE	State NC	Zip Code 28209
------------------	-------------	-------------------

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

Name of Employer GUARDIAN	Occupation FINANCIAL ADVISOR
------------------------------	---------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 29 / 2019

Transaction ID : **A0E11C5ABB3354225914**

Amount of Each Receipt this Period

500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	6100.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BUCHHEIT, GERALD, , JR.

Mailing Address 6210 OLD LAKE SHORE RD

City LAKE VIEW State NY Zip Code 14085-9548

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

Name of Employer ACCENT STRIPE Occupation PRESIDENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 23 / 2019

Transaction ID : **AD6883AF856814B5B8FB**

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BURNS, JOSEPH, T., ,

Mailing Address 1811 NORTHWOOD DR

City WILLIAMSVILLE State NY Zip Code 14221-3880

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 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 / 2019

Transaction ID : **A44FDCCC0CFB1407BBFC**

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BURSKY, ANDREW, M., ,

Mailing Address 100 NORTHFIELD ST

City GREENWICH State CT Zip Code 06830-4618

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

Name of Employer ATLAS HOLDINGS Occupation CHAIRMAN

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 29 / 2019

Transaction ID : **ADDBA46E49C3F433BAEA**

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4550.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BURSKY, ANDREW, M., ,

Mailing Address 100 NORTHFIELD ST

City GREENWICH State CT Zip Code 06830-4618

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

Name of Employer ATLAS HOLDINGS Occupation CHAIRMAN

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 29 2019

Transaction ID : **A6792776BC07F47AC8D1**

Amount of Each Receipt this Period
2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CARD, BRAD, , ,

Mailing Address 1016 D STREET NORTHEAST

City WASHINGTON State DC Zip Code 20002

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

Name of Employer CARD & ASSOCIATES Occupation LOBBYIST

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 03 2019

Transaction ID : **A1E7F3AAB73C64E6EA92**

Amount of Each Receipt this Period
800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CARSON, RUSSELL, L, ,

Mailing Address 930 FIFTH AVENUE
APARTMENT 20A

City NEW YORK State NY Zip Code 10021-2680

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

Name of Employer WELSH CARSON ANDERSON & STOW Occupation PRIVATE EQUITY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 28 2019

Transaction ID : **A0DE75068D5C74990B8D**

Amount of Each Receipt this Period
5600.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 9200.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CARSON, RUSSELL, L, ,

Mailing Address 930 FIFTH AVENUE
APARTMENT 20A

City NEW YORK State NY Zip Code 10021-2680

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

Name of Employer WELSH CARSON ANDERSON & STOW Occupation PRIVATE EQUITY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 04 / 2019

Transaction ID : **A1AA419E0E7EC4ACD82C**

Amount of Each Receipt this Period
- 2800.00

Memo Item
REDESIGNATION FROM

B. Full Name (Last, First, Middle Initial)
CARSON, RUSSELL, L, ,

Mailing Address 930 FIFTH AVENUE
APARTMENT 20A

City NEW YORK State NY Zip Code 10021-2680

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

Name of Employer WELSH CARSON ANDERSON & STOW Occupation PRIVATE EQUITY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 04 / 2019

Transaction ID : **A5802DC3180AD4F759BC**

Amount of Each Receipt this Period
2800.00

Memo Item
REDESIGNATION TO

C. Full Name (Last, First, Middle Initial)
CHADWICK, KIRSTEN, A, MS.,

Mailing Address 601 PRESIDENT FORD LN

City ALEXANDRIA State VA Zip Code 22302-3033

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

Name of Employer FIERCE GOVERNMENT RELATIONS Occupation CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 28 / 2019

Transaction ID : **AA65834F13C1A4BA48F4**

Amount of Each Receipt this Period
1800.00

Memo Item

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 10 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHAMBERS, RAYMOND, G., ,

Mailing Address 310 SOUTH STREET 4TH FLOOR

City MORRISTOWN State NJ Zip Code 07960-7301

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 17 / 2019

Transaction ID : **AA54700C8CFCB4F89AD5**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CHAMBERY, GREGORY, J, MR.,

Mailing Address 100 DANIEL DR

City WEBSTER State NY Zip Code 14580-2912

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

Name of Employer MAPLEWOOD NURSING HOME Occupation OWNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A171303BFB4634FF29E1**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CRAIG, CHARLES, R, MR.,

Mailing Address 18 KNOLLBROOK LN E

City PAINTED POST State NY Zip Code 14870-9345

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

Name of Employer CORNING INC. Occupation SR VP

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 23 / 2019

Transaction ID : **A406210AE8F8746438D7**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CROWN, JAMES, S.,

Mailing Address 222 N LA SALLE ST
STE 2000

City CHICAGO State IL Zip Code 60601-1109

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

Name of Employer HENRY CROWN & COMPANY Occupation PRESIDENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A30C102BD380946FDAC1**

Amount of Each Receipt this Period
2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DALAL, MAYUR, ,

Mailing Address 275 MADISON AVENUE

City NEW YORK State NY Zip Code 10016-1101

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

Name of Employer DALAL CAPITAL ADVISORS, LLC Occupation CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 06 / 2019

Transaction ID : **A5CBDFB0FAFD34B62AFC**

Amount of Each Receipt this Period
1500.00

Memo Item

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

Mailing Address 101 CONSTITUTION AVE NW
STE 675

City WASHINGTON State DC Zip Code 20001-2176

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

Name of Employer CAPITOL TAX PARTNERS Occupation PARTNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 24 / 2019

Transaction ID : **AC795B64E703547B2943**

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

5300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 12 OF 150	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DOSHAY, GLENN, , ,

Mailing Address **PO BOX 675210**

City RANCHO SANTA FE	State CA	Zip Code 92067
--------------------------------	--------------------	--------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
--	--

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2018 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : A97909B6DF70C4A358BE

Amount of Each Receipt this Period
 0.00 100.00 200.00 300.00 400.00 500.00 600.00 700.00 800.00 900.00 1000.00 1500.00 2000.00 2500.00 3000.00 3500.00 4000.00 4500.00 5000.00 5500.00 6000.00 6500.00 7000.00 7500.00 8000.00 8500.00 9000.00 9500.00 10000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DOYLE, MICHAEL, J, MR.,

Mailing Address **PO BOX 222**

City HAMMONDSPORT	State NY	Zip Code 14840-0222
-----------------------------	--------------------	-------------------------------

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

Name of Employer PLEASANT VALLEY WINE CO.	Occupation PRESIDENT
---	--------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2018 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : A6BFCCD95948449BFA5C

Amount of Each Receipt this Period
 0.00 100.00 200.00 300.00 400.00 500.00 600.00 700.00 800.00 900.00 1000.00 1500.00 2000.00 2500.00 3000.00 3500.00 4000.00 4500.00 5000.00 5500.00 6000.00 6500.00 7000.00 7500.00 8000.00 8500.00 9000.00 9500.00 10000.00

Memo Item

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

Mailing Address **444 W LAKE ST STE 2000**

City CHICAGO	State IL	Zip Code 60606
------------------------	--------------------	--------------------------

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

Name of Employer THE DUCHOSSOIS GROUP	Occupation EXECUTIVE
---	--------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2018 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : AD49666205D5143ACB66

Amount of Each Receipt this Period
 0.00 100.00 200.00 300.00 400.00 500.00 600.00 700.00 800.00 900.00 1000.00 1500.00 2000.00 2500.00 3000.00 3500.00 4000.00 4500.00 5000.00 5500.00 6000.00 6500.00 7000.00 7500.00 8000.00 8500.00 9000.00 9500.00 10000.00

Memo Item

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

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

0.00 100.00 200.00 300.00 400.00 500.00 600.00 700.00 800.00 900.00 1000.00 1500.00 2000.00 2500.00 3000.00 3500.00 4000.00 4500.00 5000.00 5500.00 6000.00 6500.00 7000.00 7500.00 8000.00 8500.00 9000.00 9500.00 10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 150	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ELLIS, RONALD, , ,

Mailing Address 614 PLEASANT VALLEY RD

City ALFRED STATION	State NY	Zip Code 14803-9724
------------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2019

Transaction ID : A579BAA90FAF6407B813

Amount of Each Receipt this Period
 _____ 400.00

Memo Item

B. Full Name (Last, First, Middle Initial)
EMMETT, DAN, A., ,

Mailing Address 808 WILSHIRE BLVD
STE 200

City SANTA MONICA	State CA	Zip Code 90401-1889
----------------------	-------------	------------------------

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

Name of Employer EMMETT FOUNDATION	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : AD2F366257CD24094962

Amount of Each Receipt this Period
 _____ 2800.00

Memo Item

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

Mailing Address 100 FIRST STAMFORD PLACE

City STAMFORD	State CT	Zip Code 06902
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 28 / 2019

Transaction ID : AD58FF5BE0A294DFD883

Amount of Each Receipt this Period
 _____ 2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 6000.00
TOTAL This Period (last page this line number only)..... ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 14 OF 150		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRANK, JIM, , MR,

Mailing Address 1200 HAMPTONDALE

City WINNETKA	State IL	Zip Code 60093-1814
------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 07 / 2019

Transaction ID : A43A9BA2333614E90983

Amount of Each Receipt this Period
2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FRANK, JIM, , MR,

Mailing Address 1200 HAMPTONDALE

City WINNETKA	State IL	Zip Code 60093-1814
------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 07 / 2019

Transaction ID : A960E1789F3CD4C1AB80

Amount of Each Receipt this Period
2800.00

Memo Item

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

Mailing Address 6 CLAREMONT AVE

City BUFFALO	State NY	Zip Code 14222-1123
-----------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2020
 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 / 2019

Transaction ID : A14E0002868C44107ACD

Amount of Each Receipt this Period
500.00

Memo Item

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

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

6100.00

**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 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEE, ROBERT, , ,
 Mailing Address 3 S LINCOLN ST
 City NATICK State MA Zip Code 01760-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2019
Transaction ID : AD80AF40AB4C64D25B9E
 Amount of Each Receipt this Period
 375.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
GOODMAN, ROBERT, , MR,
 Mailing Address 1013 COVE ROAD
 City MAMARONECK State NY Zip Code 10543-4324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2019
Transaction ID : A1AD3845476FC4274B2E
 Amount of Each Receipt this Period
 2800.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
GOODRICH, T. MICHAEL, , ,
 Mailing Address 3320 DELL ROAD
 City BIRMINGHAM State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 28 / 2019
Transaction ID : AD222419172FD4D93B89
 Amount of Each Receipt this Period
 2800.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5975.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 16 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HERMAN, RAYMOND, C., , III
 Mailing Address 114 OAKGROVE DR
 City: BUFFALO State: NY Zip Code: 14221-6910
 FEC ID number of contributing federal political committee: C
 Name of Employer: ERIE COUNTY Occupation: ATTORNEY
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 250.00

Date of Receipt: 04 / 29 / 2019
Transaction ID : A0DA0C8895D394A31A25
 Amount of Each Receipt this Period: 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
HOREY, STONER, E, ,
 Mailing Address 3461 PIERCE RD
 City: CANISTEO State: NY Zip Code: 14823-9612
 FEC ID number of contributing federal political committee: C
 Name of Employer: NONE Occupation: RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 1375.00

Date of Receipt: 06 / 04 / 2019
Transaction ID : A133DCBFC2A914616B8F
 Amount of Each Receipt this Period: 700.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
JACOBS, CHRISTOPHER, , ,
 Mailing Address 120 W TUPPER ST
 STE 1
 City: BUFFALO State: NY Zip Code: 14201-2170
 FEC ID number of contributing federal political committee: C
 Name of Employer: NY STATE Occupation: STATE SENATOR
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 250.00

Date of Receipt: 04 / 29 / 2019
Transaction ID : AFCA83EF443F04F77A95
 Amount of Each Receipt this Period: 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1200.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 150	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHNSON, CANDACE, S., DR.,

Mailing Address 195 BRANTWOOD RD

City BUFFALO	State NY	Zip Code 14226-4369
-----------------	-------------	------------------------

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

Name of Employer ROSWELL PARK CANCER INSTITUTE	Occupation DEPUTY DIRECTOR
---	-------------------------------

Receipt For: 2020
 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 / 2019

Transaction ID : A69EE0D3F9386487797C

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JONES, BRADFORD, , ,

Mailing Address 1820 THE STRAND

City MANHATTAN BEACH	State CA	Zip Code 90266-4527
-------------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2019

Transaction ID : A0B80CA8B76E149C4865

Amount of Each Receipt this Period
 _____ 2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOYCE, LORRAINE, A, MS.,

Mailing Address 4 EAST AVE

City ANDOVER	State NY	Zip Code 14806-9316
-----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2019

Transaction ID : A116F163BA2EB47FB963

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 3300.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

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

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

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOYCE, RICHARD, W., MR.,

Mailing Address PO BOX 330

City WELLSVILLE	State NY	Zip Code 14895-0330
--------------------	-------------	------------------------

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

Name of Employer OTIS EASTERN SERVICE LLC	Occupation CONSTRUCTION MANAGER
--	------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2019

Transaction ID : **ADC0490B764ED445FBFE**

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JUNG, EDWARD, , ,

Mailing Address 10091 WEST PARK RUN DRIVE
200

City LAS VEGAS	State NV	Zip Code 89145
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 28 / 2019

Transaction ID : **AD2622B239341472391B**

Amount of Each Receipt this Period
 2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KAYSA, MARY, , MRS.,

Mailing Address 716 MONKEY RUN RD

City ELMIRA	State NY	Zip Code 14901-9218
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2019

Transaction ID : **A6775263FE30D48F58D1**

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3075.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 19 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KAYSA, MARY, , MRS.,
Mailing Address 716 MONKEY RUN RD

City ELMIRA	State NY	Zip Code 14901-9218
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2019

Transaction ID : A02EB50B806CD49A2A32

Amount of Each Receipt this Period
 _____ 25.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KAYSA, MARY, , MRS.,
Mailing Address 716 MONKEY RUN RD

City ELMIRA	State NY	Zip Code 14901-9218
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2019

Transaction ID : A136589340B2047B9AB6

Amount of Each Receipt this Period
 _____ 25.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KAYSA, MARY, , MRS.,
Mailing Address 716 MONKEY RUN RD

City ELMIRA	State NY	Zip Code 14901-9218
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2019

Transaction ID : AC10049706A764BE59CA

Amount of Each Receipt this Period
 _____ 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	_____ 75.00
TOTAL This Period (last page this line number only).....▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 20 OF 150
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial) KAYSA, MARY, , MRS.,
Mailing Address 716 MONKEY RUN RD
City ELMIRA State NY Zip Code 14901-9218
FEC ID number of contributing federal political committee. C
Name of Employer NONE Occupation HOMEMAKER
Receipt For: 2020
Primary General
Other (specify)
Election Cycle-to-Date 325.00

Date of Receipt 05 / 22 / 2019
Transaction ID : A4A55FD87BEBF4BAC91F
Amount of Each Receipt this Period 25.00
Memo Item

B. Full Name (Last, First, Middle Initial) KAYSA, MARY, , MRS.,
Mailing Address 716 MONKEY RUN RD
City ELMIRA State NY Zip Code 14901-9218
FEC ID number of contributing federal political committee. C
Name of Employer NONE Occupation HOMEMAKER
Receipt For: 2020
Primary General
Other (specify)
Election Cycle-to-Date 350.00

Date of Receipt 05 / 28 / 2019
Transaction ID : A21B775DFEB764B6A969
Amount of Each Receipt this Period 25.00
Memo Item

C. Full Name (Last, First, Middle Initial) KAYSA, MARY, , MRS.,
Mailing Address 716 MONKEY RUN RD
City ELMIRA State NY Zip Code 14901-9218
FEC ID number of contributing federal political committee. C
Name of Employer NONE Occupation HOMEMAKER
Receipt For: 2020
Primary General
Other (specify)
Election Cycle-to-Date 375.00

Date of Receipt 06 / 17 / 2019
Transaction ID : A57DEF05D09ED40F9B09
Amount of Each Receipt this Period 25.00
Memo Item

SUBTOTAL of Receipts This Page (optional) 75.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KAYSA, MARY, , MRS.,

Mailing Address 716 MONKEY RUN RD

City ELMIRA State NY Zip Code 14901-9218

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A9E7DFD52400F469DB51**

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KOTALIK, SUE, B., MS.,

Mailing Address 4884 COUNTY ROAD 11

City RUSHVILLE State NY Zip Code 14544-9723

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
265.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 28 / 2019

Transaction ID : **AC37498846EA24654975**

Amount of Each Receipt this Period
265.00

Memo Item

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

Mailing Address 81 TELFAIR DR

City BUFFALO State NY Zip Code 14221-3617

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

Name of Employer ROSWELL PARK COMPREHENSIVE CANCER Occupation ADMINISTRATOR

Receipt For: 2020
 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 / 2019

Transaction ID : **A7497E04240A84AE0B57**

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00

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

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

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

FOR LINE NUMBER: PAGE 22 OF 150
(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)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KUNKLER, WILLIAM, , ,

Mailing Address 1500 NORTH LAKE SHORE DRIVE

City CHICAGO State IL Zip Code 60610-6686

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

Name of Employer CROWN CHICAGO Occupation EXECUTIVE

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2019

Transaction ID : **AEF68CEE6BD8B4B6D9BD**

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LADAS, THALIA, , ,

Mailing Address 2435 SENECA ST

City BUFFALO State NY Zip Code 14210-2621

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2019

Transaction ID : **A70477D26BC534CCCB1E**

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LAMAR, CHARLES, W., MR, III

Mailing Address PO BOX 66338

City BATON ROUGE State LA Zip Code 70896-6338

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

Name of Employer WOODLAWN INVESTMENTS Occupation EXECUTIVE

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : **A6126C8FE38D54193AA9**

Amount of Each Receipt this Period
 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00

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

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

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

FOR LINE NUMBER: PAGE 23 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LANE, ERIN, L., MS.,
Mailing Address 1703 BLACK OAK LN

City SILVER SPRING State MD Zip Code 20910-1423

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

Name of Employer CASCADE ASSOCIATES Occupation CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 14 / 2019

Transaction ID : **A16D80003042E4A40BAF**

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LANG, FREDERICK, P, MR.,
Mailing Address PO BOX 272

City HORNELL State NY Zip Code 14843-0272

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
217.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 20 / 2019

Transaction ID : **A237076D8BFA84FB2B58**

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LEE, CYNTHIA, R., MRS.,
Mailing Address 13 SUNRISE CAY DR

City KEY LARGO State FL Zip Code 33037-5301

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 28 / 2019

Transaction ID : **A9C9CA5CE0758416E90E**

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3400.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 24 OF 150	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEENHOUTS, NELSON, B, MR.,

Mailing Address 180 CLINTON SQ

City ROCHESTER	State NY	Zip Code 14604-1719
-------------------	-------------	------------------------

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

Name of Employer HOME PROPERTIES	Occupation CEO
-------------------------------------	-------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2019

Transaction ID : A37243422324F4C8282D

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LEE, PATRICK, P, MR.,

Mailing Address 5166 MAIN ST
STE 303

City WILLIAMSVILLE	State NY	Zip Code 14221-5264
-----------------------	-------------	------------------------

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

Name of Employer PATRICK P. LEE FOUNDATION	Occupation CEO
---	-------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2019

Transaction ID : A1CE6DE54C1FD4D2898B

Amount of Each Receipt this Period
2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LENT HILL DAIRY FARM LLC

Mailing Address 10799 EDMOND RD

City COHOCTON	State NY	Zip Code 14826-9640
------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2019

Transaction ID : A6B9AD3807F1D40E6B5A

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

5800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 150	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WOLCOTT, PAUL, , ,

Mailing Address 10799 EDMOND ROAD

City COHOCTON	State NY	Zip Code 14826-9640
------------------	-------------	------------------------

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

Name of Employer LENT HILL DAIRY FARM LLC	Occupation PARTNER
--	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2019

Transaction ID : A5F8C5D949E8144278BD

Amount of Each Receipt this Period
1000.00

Memo Item

PARTNERSHIP: LENT HILL DAIRY FARM LLC

B. Full Name (Last, First, Middle Initial)
WOLCOTT, MAUREEN, , ,

Mailing Address 10799 EDMOND ROAD

City COHOCTON	State NY	Zip Code 14826-9640
------------------	-------------	------------------------

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

Name of Employer LENT HILL DAIRY FARM, LLC	Occupation PARTNER
---	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2019

Transaction ID : A0B696775B51C47069E3

Amount of Each Receipt this Period
1000.00

Memo Item

PARTNERSHIP: LENT HILL DAIRY FARM LLC

C. Full Name (Last, First, Middle Initial)
MALKIN, PETER, L., MR,

Mailing Address C/O WIEN & MALKIN LLP
60 E. 42SN STREET

City NEW YORK	State NY	Zip Code 10165
------------------	-------------	-------------------

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

Name of Employer WIEN & MALKIN LLP	Occupation ATTORNEY
---------------------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2019

Transaction ID : A505967BC4AD94268A56

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	1000.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 26 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARKS, HOWARD, S., ,

Mailing Address 50 CENTRAL PARK S
APT 33

City NEW YORK State NY Zip Code 10019-1613

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

Name of Employer OAKTREE CAPITAL Occupation CO-CHAIRMAN

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 03 / 2019

Transaction ID : **A3D03C647E9F24778AD4**

Amount of Each Receipt this Period
2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MARTUCCI, VICTOR, A., ,

Mailing Address 10040 HIGHVIEW CT

City CLARENCE State NY Zip Code 14031-1525

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

Name of Employer MASIELLO, MARTUCCI, CALABRESO & ASSC Occupation LOBBYIST

Receipt For: 2020
 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 / 2019

Transaction ID : **A0CB0DFC1F7F048AFB9A**

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MASHANTUCKET PEQUOT TRIBAL NATION

Mailing Address PO BOX 3008

City MASHANTUCKET State CT Zip Code 06338-3008

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **ABF7FBAC89264402F9A7**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4300.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MAYER, TONY, , ,

Mailing Address 7 UPLAND DRIVE

City GREENWICH State CT Zip Code 06831

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____, _____, _____ 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2019

Transaction ID : **A3E714A491FDA4A69861**

Amount of Each Receipt this Period
 _____, _____, _____ 2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MAY, PETER, W., ,

Mailing Address 146 CENTRAL PARK W

City NEW YORK State NY Zip Code 10023-6297

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

Name of Employer TRIAN PARTNERS Occupation INVESTOR

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____, _____, _____ 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : **AFF32AB9A69E34AD38DC**

Amount of Each Receipt this Period
 _____, _____, _____ 2800.00

Memo Item

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

Mailing Address 420 7TH ST NW
APT 407

City WASHINGTON State DC Zip Code 20004-2222

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

Name of Employer DMM STRATEGIES Occupation CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____, _____, _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2019

Transaction ID : **ADA8F1687C5EF4888A21**

Amount of Each Receipt this Period
 _____, _____, _____ 1000.00

Memo Item

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

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

_____ 6600.00

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

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

FOR LINE NUMBER: PAGE 28 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MCDONNELL, JOHN, , ,

Mailing Address 1 SERENDIPITY LANE

City SAINT LOUIS State MO Zip Code 63131-1307

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : **ACDB52E448DB245C785E**

Amount of Each Receipt this Period
2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MCLEAN, TERENCE, , ,

Mailing Address 101 HUDSON ST

City JERSEY CITY State NJ Zip Code 07302

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : **AB57FEECB06D9422883E**

Amount of Each Receipt this Period
2800.00

Memo Item

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

Mailing Address 644 BROADWAY
8W

City NEW YORK State NY Zip Code 10012

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : **AA53C9C68C3BC4568B8E**

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 8400.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 29 OF 150	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MILLER, ALBERT, , ,

Mailing Address 503 BURR RIDGE CLUB

City BURR RIDGE	State IL	Zip Code 60527
--------------------	-------------	-------------------

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

Name of Employer PHOENIX CLOSURES INC.	Occupation CEO
---	-------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : A8B138661E34D4799B23

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
MITCHELL, MARK, , ,

Mailing Address 33781 VIA ZAMORA

City SAN JUAN CAPISTRAN	State CA	Zip Code 92675
----------------------------	-------------	-------------------

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

Name of Employer AXA	Occupation FINANCIAL ADVOSOR
-------------------------	---------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 07 / 2019

Transaction ID : AB8505174EF9F4F79A0E

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
MORONGO BAND OF MISSION INDIANS

Mailing Address 12700 PUMARRA RD

City BANNING	State CA	Zip Code 92220-6977
-----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : A60E1E18477374168AD0

Amount of Each Receipt this Period

Memo Item

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MYHREN, TRYGVE, , ,

Mailing Address **2552 E ALAMEDA AVE**
UNIT 59

City **DENVER** State **CO** Zip Code **80209-3323**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 11 / 2019

Transaction ID : A4639F19737FA4391BD0

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
OBERNAUER, MARNE, , , JR.

Mailing Address

City State Zip Code

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 11 / 2019

Transaction ID : AF98C364D755A4F5DB7E

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ONEIDA INDIAN NATION

Mailing Address **1 TERRITORY ROAD**

City **ONEIDA** State **NY** Zip Code **13421-9304**

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : ACA0DFDC5202345F6B28

Amount of Each Receipt this Period
2800.00

Memo Item

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

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

5300.00

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 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PECHANGA BAND OF LUISENO INDIANS

Mailing Address **PECHANGA BAND OF LUISENO INDIANS**
PO BOX 1477

City **TEMECULA** State **CA** Zip Code **92593**

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : **AAB86359B181A410BA0E**

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PELTZ, MATTHEW, , ,

Mailing Address **280 PARK AVENUE**
41ST FLOOR

City **NEW YORK** State **NY** Zip Code **10017**

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

Name of Employer Occupation
TRIAN PARTNERS **PARTNER**

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : **A55AD837B391843E8B8C**

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address **280 PARK AVE, 41ST FLOOR**
41ST FLOOR

City **NEW YORK** State **NY** Zip Code **10017-1217**

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

Name of Employer Occupation
TRIAN FUND **FOUNDING MEMBER**

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : **A4C1725223A1E454AB9F**

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **5300.00**

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

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

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

FOR LINE NUMBER: PAGE 32 OF 150
(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)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PENTA, ROLAND, P., MR.,
 Mailing Address 224 CROSS RD
 City GENEVA State NY Zip Code 14456-9306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PHELPS SUNGAS Occupation PRESIDENT
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 10 / 2019
Transaction ID : AD48025AF7D9D482DB2D
 Amount of Each Receipt this Period
 2800.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
PHILLIPS LYTLE LLP
 Mailing Address 125 MAIN ST
 City BUFFALO State NY Zip Code 14203-3070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2019
Transaction ID : AFB5F1A661B0547CA8E3
 Amount of Each Receipt this Period
 2800.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
SCHMIDT, JOHN, G., MR., JR.
 Mailing Address 125 MAIN ST
 City BUFFALO State NY Zip Code 14203-3070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PHILLIPS LYTLE LLP Occupation PARTNER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2019
Transaction ID : AB29DE2D6A8FC43E58AD
 Amount of Each Receipt this Period
 2800.00
 Memo Item
 PARTNERSHIP: PHILLIPS LYTLE LLP

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

5600.00

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

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

FOR LINE NUMBER: PAGE 33 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PLANAVASKY, RICHARD, , ,
 Mailing Address 909 N COLONY RD
 City GRAND ISLAND State NY Zip Code 14072-2801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2020
 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 2019
Transaction ID : AEBF0146154B049FEBF9
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
ROGERS, THOMAS, R., MR.,
 Mailing Address 30 BRISTOL VIEW DR
 City FAIRPORT State NY Zip Code 14450-4214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LEWIS TREE SERVICE Occupation PRESIDENT & CEO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 17 2019
Transaction ID : A6E1CBB62B7914EF38C9
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
SCHWARTZ, ALAN, , ,
 Mailing Address 179 TACONIC ROAD
 City GREENWICH State CT Zip Code 06831-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUGGENHEIM PARTNERS, LLC Occupation INVESTMENT BANKER/ADVISOR
 Receipt For: 2020
 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 2019
Transaction ID : A9AA4AD10A5894B95A4F
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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 34 OF 150	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCHWARTZ, MARTIN, A., ,

Mailing Address 444 SYCAMORE RD.

City SANTA MONICA	State CA	Zip Code 90402-1124
----------------------	-------------	------------------------

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

Name of Employer MINILEC SERVICE LLC	Occupation BUSINESSMAN
---	---------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2019

Transaction ID : A8FF6781B024C4A59A8F

Amount of Each Receipt this Period
 2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SCHWARTZ, MARTIN, A., ,

Mailing Address 444 SYCAMORE RD.

City SANTA MONICA	State CA	Zip Code 90402-1124
----------------------	-------------	------------------------

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

Name of Employer MINILEC SERVICE LLC	Occupation BUSINESSMAN
---	---------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2019

Transaction ID : AFA308BD20DFF4C47A29

Amount of Each Receipt this Period
 2800.00

Memo Item

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

Mailing Address 2603 PALM AVENUE

City MANHATTAN BEACH	State CA	Zip Code 90266-2347
-------------------------	-------------	------------------------

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

Name of Employer VERITYPOINT	Occupation SENIOR MANAGING DIRECTOR
---------------------------------	--

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2019

Transaction ID : A2B0BC1979534485EBD4

Amount of Each Receipt this Period
 1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	7100.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 35 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SILVERMAN, STEPHANIE, E., ,
 Mailing Address 9224 WOOD LAND DR
 City SILVER SPRING State MD Zip Code 20910-1518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019
Transaction ID : A34C06D32CCBA4A79B12
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
SINGER, PAUL, E., ,
 Mailing Address 40 W 57TH ST
 City NEW YORK State NY Zip Code 10019-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EMC Occupation PRESIDENT
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2019
Transaction ID : AC008ABF6AB214070A6D
 Amount of Each Receipt this Period
 2800.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
SINGER, PAUL, E., ,
 Mailing Address 40 W 57TH ST
 City NEW YORK State NY Zip Code 10019-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EMC Occupation PRESIDENT
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2019
Transaction ID : AC046366110E34B07933
 Amount of Each Receipt this Period
 2800.00
 Memo Item

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

6100.00

**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 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SMALL, MICHAEL, , ,

Mailing Address 2120 N LINCOLN PARK W
APT 8

City CHICAGO State IL Zip Code 60614

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

Name of Employer K4 MOBILITY Occupation EXECUTIVE

Receipt For: 2020
 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 / 2019

Transaction ID : **AF305D16A513C4A46A01**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SOLOMON, MARTIN, , ,

Mailing Address 3729 UNION ST

City MINERAL RIDGE State OH Zip Code 44440-0523

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

Name of Employer P AND S EQUITIES Occupation REAL ESTATE DEVELOPER

Receipt For: 2020
 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 / 2019

Transaction ID : **A9F17FB08EE294217932**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
STANARD, JAMES, N, ,

Mailing Address 570 S SPOONBILL DR

City SARASOTA State FL Zip Code 34236-1820

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 06 / 2019

Transaction ID : **A130BA8A9E79E4F1886B**

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2200.00

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

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

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

FOR LINE NUMBER: PAGE 37 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STANARD, JANET, , ,
 Mailing Address PO BOX 14309
 City CLEVELAND State OH Zip Code 44114-0309
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2019
Transaction ID : ACE79DA2D6EED4BC0B42
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
STOLL, RUSSELL J., , ,
 Mailing Address 271 RUSKIN RD
 City BUFFALO State NY Zip Code 14226-4257
 FEC ID number of contributing federal political committee. C
 Name of Employer CLOUGH HARBOUR Occupation OFFICE MANAGER
 Receipt For: 2020
 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 / 2019
Transaction ID : A134C1C2952A24420AAE
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
STUART, ALEXANDER, , ,
 Mailing Address 506 WASHINGTON ROAD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. C
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 28 / 2019
Transaction ID : A87F7FEF093104D69B5E
 Amount of Each Receipt this Period
 2800.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3250.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 38 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUTTERFIELD, JAMES, A, MR.,

Mailing Address 2747 GOFF RD

City CORNING State NY Zip Code 14830-3636

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **AF496F493FE5743BBBA9**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TATE, CHARLES, , ,

Mailing Address 3703 SHREVE LANE

City MISSOURI CITY State TX Zip Code 77459

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

Name of Employer CRG LP Occupation CHAIRMAN EMIRITUS

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : **A249C6B8B80914555980**

Amount of Each Receipt this Period
2800.00

Memo Item

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

Mailing Address 100 KINGS HWY S

City ROCHESTER State NY Zip Code 14617-5504

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

Name of Employer ROCHESTER REGIONAL HEALTH Occupation EXECUTIVE

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2019

Transaction ID : **AD97A1913131C4689B8C**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4050.00

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

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

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

FOR LINE NUMBER: PAGE 39 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS, JAMES, , ,

Mailing Address **230 NORTH CLIFFWOOD AVENUE**

City **LOS ANGELES** State **CA** Zip Code **90049**

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

Name of Employer **THOMAS INVESTMENT PARTNERS** Occupation **REAL ESTATE**

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : **A76111EF6A8674FE48A8**

Amount of Each Receipt this Period
 2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
THOMPSON, HAZEL, M., ,

Mailing Address **147 W GRAY ST
APT 414**

City **ELMIRA** State **NY** Zip Code **14901-3018**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 23 / 2019

Transaction ID : **AC71F474EDE4A4A178D0**

Amount of Each Receipt this Period
 700.00

Memo Item

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

Mailing Address **4311 OAK LAWN AVE., SUITE 520, DAL
SUITE 520**

City **DALLAS** State **TX** Zip Code **75219**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : **A9BB37D6B692F4C47802**

Amount of Each Receipt this Period
 2500.00

Memo Item

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 40 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TOCCO, JESSICA, , ,

Mailing Address 20 EDGEMERE ST

City MELROSE State MA Zip Code 02176-5404

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

Name of Employer A10 ASSOCIATES Occupation CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2019

Transaction ID : **A774717DDAEB744C7822**

Amount of Each Receipt this Period
 2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WALTER, RAYMOND, W., ,

Mailing Address 4875 MAIN ST #3

City BUFFALO State NY Zip Code 14226-4080

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

Name of Employer MAGAVERN MAGAVERN & GRIMM Occupation ATTORNEY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2019

Transaction ID : **AFFC318B99DD34BCBA26**

Amount of Each Receipt this Period
 300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WARDEN, JOHN, L., ,

Mailing Address 125 BROAD STREET

City NEW YORK State NY Zip Code 10004-3061

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

Name of Employer SULLIVAN + CROMWELL LLP Occupation ATTORNEY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2019

Transaction ID : **A2B65B6BB706B4022BF2**

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3350.00

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

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

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

FOR LINE NUMBER: PAGE 41 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WD MANAGEMENT, LLC

Mailing Address 375 ESSJAY STE 200

City: BUFFALO State: NY Zip Code: 14221-5789

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 04 / 29 / 2019

Transaction ID : A334F785BAEA242F4A1C

Amount of Each Receipt this Period: 250.00

Memo Item
SEE REFUND BELOW

B. Full Name (Last, First, Middle Initial)
WERBALOWSKY, JEFF, , MR,

Mailing Address 6000 FOX MEADOW LANE

City: EDINA State: MN Zip Code: 55436-1215

FEC ID number of contributing federal political committee: C

Name of Employer: HOULIHANLOKEY Occupation: FINANCE

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2800.00

Date of Receipt: 06 / 07 / 2019

Transaction ID : AE7E3E68B1E454F4DBF9

Amount of Each Receipt this Period: 2800.00

Memo Item

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

Mailing Address 76 MAPLE ST

City: HORNELL State: NY Zip Code: 14843-1656

FEC ID number of contributing federal political committee: C

Name of Employer: ANIMAL ID & MARKING SYSTEM Occupation: DIRECTOR RESEARCH & DEVELOPMENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 04 / 23 / 2019

Transaction ID : AE0618304435F48D48DE

Amount of Each Receipt this Period: 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3300.00

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

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 42 OF 150

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WHITFORD, L. CHANDLER, , MR.,
 Mailing Address PO BOX 663

City: **WELLSVILLE** State: **NY** Zip Code: **14895-0663**

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

Name of Employer: **LC WHITFORD** Occupation: **OWNER**

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A32880E4339DA49DE8C9**

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WHITFORD, L. BRADLEY, , ,
 Mailing Address 334 N SHORE RD

City: **CUBA** State: **NY** Zip Code: **14727-9227**

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

Name of Employer: **LC WHITFORD** Occupation: **PRESIDENT**

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 03 / 2019

Transaction ID : **A064C4D70F40943AFA47**

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WILLIAMS, JEFFREY, D., ,
 Mailing Address 363 MOUNTAIN VIEW DRIVE

City: **LEWISTON** State: **NY** Zip Code: **14092-1910**

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

Name of Employer: **SELF** Occupation: **REALTOR**

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 22 / 2019

Transaction ID : **AC65564EBB8734CA1B11**

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER: PAGE 43 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
YOUNG, THOMAS, P, MR.,
Mailing Address 7 CENTER XING

City FAIRPORT State NY Zip Code 14450-8715

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

Name of Employer WEGMANS FOOD MARKETS INC Occupation ATTORNEY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **A0FD1DADAF3B7479AA5C**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ZAEPFEL, JAMES, , ,
Mailing Address PO BOX 1231

City WILLIAMSVILLE State NY Zip Code 14231-1231

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

Name of Employer ZAEPFEL DEVELOPMENT Occupation PRESIDENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2019

Transaction ID : **A9FE2BEDB65A24837867**

Amount of Each Receipt this Period
750.00

Memo Item

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

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	161440.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AGRI MARK LEGISLATION & EDUCATION COMMITTEE

Mailing Address 6354 ALDERMAN DRIVE

City ALEXANDRIA	State VA	Zip Code 22315-3731
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00141242

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : AC61A0486485641668DC

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ALTERMAN MANAGEMENT GROUP, INC. PAC

Mailing Address 14703 JONES MALTSBERGER RD

City SAN ANTONIO	State TX	Zip Code 78247-3713
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00652883

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A9503A7CAFDA7496C8E7

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMER SOCIETY OF ANESTHESIOLOGISTS PAC

Mailing Address 1101 VERMONT AVE NW
STE 606

City WASHINGTON	State DC	Zip Code 20005-3528
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2019

Transaction ID : A0B866A1F8AC64BA19CE

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	_____ 4000.00
TOTAL This Period (last page this line number only).....▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMER. COUNCIL OF LIFE INSURERS PAC (ACLI)

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 700

City WASHINGTON	State DC	Zip Code 20001-2133
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00147066

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : A609B4FF053314F4D95D

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE (SKINPAC)

Mailing Address 1445 NEW YORK AVENUE NW
STE 800

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : ACCF2ECD2672C4775A09

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF NEUROLOGY PAC (BRAIN PAC)

Mailing Address 401 C ST NE

City WASHINGTON	State DC	Zip Code 20002-5817
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00435933

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : A0D6433489FE8447F8C2

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	6000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN ASSOC OF ORTHOPAEDIC SURGEONS (AAOS)

Mailing Address 317 MASSACHUSETTS AVENUE NE
SUITE 100

City WASHINGTON State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **AA8E17BD59CB34B12B97**

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF CROP INSURERS PAC

Mailing Address 701 8TH ST NW
STE 500

City WASHINGTON State DC Zip Code 20001-3965

FEC ID number of contributing federal political committee. **C** C00172833

Name of Employer Occupation

Receipt For: 2020
 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 / 2019

Transaction ID : **A1F2677F7A6234755970**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN CHIROPRACTIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1701 CLARENDON BLVD. SUITE #200

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00102764

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A1FA894DB069E4483A32**

Amount of Each Receipt this Period
4000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	7500.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 PRESTON WHITE DR

City RESTON	State VA	Zip Code 20191-4326
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A6AB2B59836314E278A5

Amount of Each Receipt this Period
 _____ 1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSO.(ACSPA)

Mailing Address 20 F STREET NW
SUITE 1000

City WASHINGTON	State DC	Zip Code 20001-6701
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00382424

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2019

Transaction ID : A693F3D75069346B8947

Amount of Each Receipt this Period
 _____ 1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR PAC

Mailing Address 101 3RD ST N

City MOORHEAD	State MN	Zip Code 56560-1952
------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 28 / 2019

Transaction ID : AE701D8BC9C4646E09C2

Amount of Each Receipt this Period
 _____ 5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 8000.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 48 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1111 14TH STREET, NW
SUITE 1100

City WASHINGTON State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **A12BF5B74CB734328B2B**

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN GAS ASSOCIATION (GASPAC)

Mailing Address 400 N CAPITOL STREET NW

City WASHINGTON State DC Zip Code 20001-1511

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **A66BEBCFDA48B4089841**

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOC. PAC (AHAPAC)

Mailing Address 800 TENTH STREET NW
TWO CITY CENTER, SUITE 400

City WASHINGTON State DC Zip Code 20001-4956

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **A3E92563A5C80475E9DF**

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 9500.00

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

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

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

FOR LINE NUMBER: PAGE 49 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF ARCHITECTS PAC (AIA)

Mailing Address 1735 NEW YORK AVENUE NW

City WASHINGTON State DC Zip Code 20006-5209

FEC ID number of contributing federal political committee. **C** C00139071

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2019

Transaction ID : **AEFF4F2E829604A048C1**

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address PALLADIAN 1
220 LEIGH FARM RD

City DURHAM State NC Zip Code 27707

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2019

Transaction ID : **A924636DFB7AB4D4FA1D**

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN NEUROLOGICAL SURGERY PAC (NEUROSURGERY PAC)

Mailing Address 25 MASSACHUSETTS AVE NW
STE 610

City WASHINGTON State DC Zip Code 20001-1430

FEC ID number of contributing federal political committee. **C** C00413955

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **AE764194F17194E6EA8D**

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 7500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN POSTAL WORKERS UNION (APWU COPA)

Mailing Address 1300 L ST NW

City WASHINGTON	State DC	Zip Code 20005-4107
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A21337247EB5346E0BCA

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN PSYCHIATRIC ASSOC. PAC (APAPAC)

Mailing Address 800 MAINE AVE SW
STE 900

City WASHINGTON	State DC	Zip Code 20024-2805
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00373696

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : AD90C68F04BF940829ED

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES PAC (APAC)

Mailing Address 1575 I STREET NW

City WASHINGTON	State DC	Zip Code 20005-1105
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00041566

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : AAA47C5B75E8A461CB87

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICA'S HEALTH INSURANCE PLANS PAC

Mailing Address 601 PENNSYLVANIA AVE NW
SOUTH BLDG - STE 500

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106740

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 23 / 2019

Transaction ID : AE38A2EFF57144EC5A97

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
APPLIED MATERIALS INC. PAC

Mailing Address 20 PARK ROAD
SUITE E

City BURLINGAME State CA Zip Code 94010-4443

FEC ID number of contributing federal political committee. **C** C00406892

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : A135AFF7E06C0476FB3F

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ARENT FOX PAC (AFPAC)

Mailing Address 1717 K ST NW

City WASHINGTON State DC Zip Code 20006-5343

FEC ID number of contributing federal political committee. **C** C00241380

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : A330286843AC74E39AE4

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 52 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

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

Mailing Address 8280 WILLOW OAKS CORPORATE DR
STE 500

City State Zip Code
FAIRFAX VA 22031-4514

FEC ID number of contributing federal political committee. **C** C00384602

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 23 2019

Transaction ID : **AF664AF26813B44E68EB**

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 208 S. AKARD STREET
SUITE 1812

City State Zip Code
DALLAS TX 75202

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 17 2019

Transaction ID : **AC1014DC393064039B9D**

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AUSTIN INDUSTRIES COMPANIES PAC

Mailing Address PO BOX 1590

City State Zip Code
DALLAS TX 75221-1590

FEC ID number of contributing federal political committee. **C** C00093179

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 30 2019

Transaction ID : **AD686B68C484B4210B7C**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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

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

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

FOR LINE NUMBER: PAGE 53 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

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

Mailing Address 52 FARM VIEW DR

City NEW GLOUCESTER State ME Zip Code 04260-5100

FEC ID number of contributing federal political committee. **C** C00406801

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **A4ECCB540A20045909FA**

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BANK OF AMERICA CORPORATION FEDERAL PAC

Mailing Address 1455 PENNSYLVANIA AVE NW SUITE 950
DC8-455-09-01

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00364778

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2019

Transaction ID : **A02BC73AED52C4F519B7**

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BARNES & THORNBURG PAC

Mailing Address 11 S MERIDIAN ST

City INDIANAPOLIS State IN Zip Code 46204-3506

FEC ID number of contributing federal political committee. **C** C00395947

Name of Employer Occupation

Receipt For: 2020
 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 / 2019

Transaction ID : **AC0C36BA9739748EDAD9**

Amount of Each Receipt this Period
 1000.00

Memo Item

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 54 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

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

Mailing Address 1201 15TH ST NW

City WASHINGTON	State DC	Zip Code 20005-2899
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2019

Transaction ID : A1DF0138974C946C2921

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BURNS & MCDONNELL INC PAC

Mailing Address 9400 WARD PKWY

City KANSAS CITY	State MO	Zip Code 64114-3319
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00442913

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : AD55B08B3DF744FE5872

Amount of Each Receipt this Period
3000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CAPITAL ONE FINANCIAL CORPORATION ASSOCIATES POLITICAL FUND

Mailing Address 1680 CAPITAL ONE DRIVE

City MCLEAN	State VA	Zip Code 22102-3407
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2019

Transaction ID : A01B47364C8044044BB9

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	9000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CARPENTERS LEGISLATIVE IMPROVEMENT COMM (CLIC)

Mailing Address 101 CONSTITUTION AVE NW

City WASHINGTON	State DC	Zip Code 20001-2133
--------------------	-------------	------------------------

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

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : ABB535803496C4F55914

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CATERPILLAR PAC (CATPAC)

Mailing Address 1425 K ST NW
STE 400

City WASHINGTON	State DC	Zip Code 20005-3685
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 03 / 2019

Transaction ID : A0AAF55126D44680837

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 1099 NEW YORK AVE NW

City WASHINGTON	State DC	Zip Code 20001-4836
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00419911

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : A68B4265664524C199F6

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	8500.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 56 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHARTER COMMUNICATIONS INC. PAC
 Mailing Address 400 ATLANTIC ST
 FL 10
 City STAMFORD State CT Zip Code 06901-3512
 FEC ID number of contributing federal political committee. **C** C00426775
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019
Transaction ID : A7826E8927D2B446B802
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
CIGNA PAC
 Mailing Address 601 PENNSYLVANIA AVENUE NW
 SOUTH BLDG - SUITE 835
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00085316
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2019
Transaction ID : A98B66791E7A543AB92C
 Amount of Each Receipt this Period
 1500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
CITIGROUP PAC
 Mailing Address 1101 PENNSYLVANIA AVE NW
 STE 1000
 City WASHINGTON State DC Zip Code 20004-2524
 FEC ID number of contributing federal political committee. **C** C00008474
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019
Transaction ID : A0A142BB767D6412186E
 Amount of Each Receipt this Period
 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 6500.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CME GROUP PAC

Mailing Address 20 S WACKER DRIVE

City CHICAGO	State IL	Zip Code 60606-7431
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2019

Transaction ID : ADA671548E5BE453195E

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION PAC

Mailing Address 300 NEW JERSEY AVENUE NW
SUITE 700

City WASHINGTON	State DC	Zip Code 20001-2266
--------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2019

Transaction ID : AF67A6AB0D19B4367936

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
COMMITTEE FOR THE ADVANCEMENT OF COTTON PAC

Mailing Address 1521 NEW HAMPSHIRE AVE NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2019

Transaction ID : A835493322DA94ACA95C

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 4500.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

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

Mailing Address 207 HIGH POINT DRIVE
BUILDING 100

City VICTOR	State NY	Zip Code 14564
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00304832

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A28AFBC099A814D18BE7**

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
COZEN O'CONNOR PAC

Mailing Address 1 LIBERTY PL
1650 MARKET STREET

City PHILADELPHIA	State PA	Zip Code 19103-4201
----------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **ABF4F88A18A5F4CFEA91**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CROP INSURANCE PROFESSIONALS ASSOC. PAC

Mailing Address 228 S WASHINGTON STREET
SUITE 115

City ALEXANDRIA	State VA	Zip Code 22314-5404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00503680

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 04 / 2019

Transaction ID : **A45CDDCADE7C54A8FA14**

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	8000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CULAC OF CREDIT UNION NATIONAL ASSOC PAC

Mailing Address 601 PENNSYLVANIA AVE NW
SOUTH BUILDING, SUITE 600

City WASHINGTON State DC Zip Code 20004-2601

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A1EBEA541D77547D9B7A**

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 400 N CAPITOL ST NW
STE 875

City WASHINGTON State DC Zip Code 20001-6555

FEC ID number of contributing federal political committee. **C** C00108209

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **AA5829603CCF24339B1F**

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
EASTMAN KODAK COMPANY EMPLOYEE PAC

Mailing Address 1200 G ST NW
STE 800

City WASHINGTON State DC Zip Code 20005-6705

FEC ID number of contributing federal political committee. **C** C00297085

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **ADCB20046566C4BD59C1**

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5500.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EMPLOYEE--OWNED S CORPORATIONS OF AMERICA PAC (ESCA PAC)

Mailing Address 1341 G ST NW
STE 600

City WASHINGTON	State DC	Zip Code 20005-3135
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00458257

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A4E2E220C45F4478B8B7

Amount of Each Receipt this Period
 _____,_____,_____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ERNST & YOUNG PAC

Mailing Address 1101 NEW YORK AVENUE NW

City WASHINGTON	State DC	Zip Code 20005-4269
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A8D0C87DE6243463D83D

Amount of Each Receipt this Period
 _____,_____,_____ 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELON PAC)

Mailing Address 101 CONSTITUTION AVE NW
STE 400

City WASHINGTON	State DC	Zip Code 20001-2133
--------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A4B880AEF20B04B99BA9

Amount of Each Receipt this Period
 _____,_____,_____ 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ , _____ , _____ 6000.00
TOTAL This Period (last page this line number only)..... ▶	_____ , _____ , _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION PAC

Mailing Address 2020 K ST NW
STE 800

City WASHINGTON State DC Zip Code 20006-1820

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 23 / 2019

Transaction ID : **ADD33739DF05145968BF**

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION PAC

Mailing Address 2020 K ST NW
STE 800

City WASHINGTON State DC Zip Code 20006-1820

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A6447B60052CB42DA847**

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FRIENDS FOR PALMESANO

Mailing Address PO BOX 861

City CORNING State NY Zip Code 14830-4861

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A2B41AB3D249941A4B20**

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 62 OF 150	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRIENDS OF EDWARD RATH, III

Mailing Address PO BOX 1574
EDWARD RATH, III

City BUFFALO	State NY	Zip Code 14231-1574
-----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2019

Transaction ID : A43A66FC188F14818900

Amount of Each Receipt this Period
250.00

Memo Item
PERMISSIBLE FUNDS VERIFIED

B. Full Name (Last, First, Middle Initial)
FRIENDS OF JUDGE HAENDIGES

Mailing Address 4062 LOCKPORT AVE

City NORTH TONAWANDA	State NY	Zip Code 14120-1332
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 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 / 2019

Transaction ID : A5306C1105BCC4C4F964

Amount of Each Receipt this Period
250.00

Memo Item
PERMISSIBLE FUNDS VERIFIED

C. Full Name (Last, First, Middle Initial)
GARNEY HOLDING CO. PAC

Mailing Address 1333 NW VIVION ROAD

City KANSAS CITY	State MO	Zip Code 64118-4554
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00442905

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : AC2ADE215E1D844E1904

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : A783B4D29741D44719DA

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GOLDMAN SACHS GROUP, INC. PAC

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 1000E

City WASHINGTON	State DC	Zip Code 20001-2171
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00350744

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2019

Transaction ID : A2196DCDFAD2C49348DD

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GOODYEAR GOOD GOVERNMENT FUND

Mailing Address 300 NEW JERSEY AVE NW
STE 601

City WASHINGTON	State DC	Zip Code 20001-2080
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00100131

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2019

Transaction ID : A7007C825D4A14E4D90E

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3000.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HARRIS CORPORATION PAC (H-PAC)

Mailing Address 600 MARYLAND AVE SW
STE 850E

City WASHINGTON State DC Zip Code 20024-2566

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **AB2F7433CE69148BE948**

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HILL-ROM PAC

Mailing Address 1069 STATE ROAD 46 E

City BATESVILLE State IN Zip Code 47006-7520

FEC ID number of contributing federal political committee. **C** C00448993

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **AE5A861852F75438ABC2**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HNTB HOLDINGS LTD PAC

Mailing Address 715 KIRK DR

City KANSAS CITY State MO Zip Code 64105-1310

FEC ID number of contributing federal political committee. **C** C00386029

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A6E369E104AE8411AB4E**

Amount of Each Receipt this Period
1000.00

Memo Item

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 65 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL PAC

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 500W

City WASHINGTON	State DC	Zip Code 20001-2177
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____, _____, _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2019

Transaction ID : AC3AEFB68AB7747699F6

Amount of Each Receipt this Period
 _____, _____, _____ 1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL PAC

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 500W

City WASHINGTON	State DC	Zip Code 20001-2177
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____, _____, _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : AACF13BBD1BDA4E5D92C

Amount of Each Receipt this Period
 _____, _____, _____ 3500.00

Memo Item

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

Mailing Address 975 F STREET NW
SUITE 550

City WASHINGTON	State DC	Zip Code 20004-1458
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00271007

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____, _____, _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2019

Transaction ID : A1A7B0B52E7CB415AAEE

Amount of Each Receipt this Period
 _____, _____, _____ 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ , _____ , _____ 7500.00
TOTAL This Period (last page this line number only)..... ▶	_____ , _____ , _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS PAC (ICBPAC)

Mailing Address 1615 L STREET NW
SUITE 900

City WASHINGTON	State DC	Zip Code 20036-5623
--------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2019

Transaction ID : AF573CF85383E4C4E818

Amount of Each Receipt this Period

1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS (INSURPAC)

Mailing Address 20 F ST NW
STE 610

City WASHINGTON	State DC	Zip Code 20001-6707
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2019

Transaction ID : A6A4D181E23E7460FB62

Amount of Each Receipt this Period

5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE (ICI) PAC

Mailing Address 1401 H STREET NW
1200

City WASHINGTON	State DC	Zip Code 20005-2110
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : A12E74C53333445A9B6C

Amount of Each Receipt this Period

1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	7000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN HANCOCK LIFE INSURANCE COMPANY (USA) FEDERAL PAC

Mailing Address 601 CONGRESS ST
FL 13

City BOSTON	State MA	Zip Code 02210-2805
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00137265

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : A4A7774C7C6E84A1F8EA

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JPMORGAN CHASE & CO

Mailing Address 601 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20004-2601
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00104299

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 11 / 2019

Transaction ID : A31E6CD2E6E1A42D58A3

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JUSTICE CURRAN RE-ELECTION COMMITTEE

Mailing Address PO BOX 172

City BUFFALO	State NY	Zip Code 14201-0172
-----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 29 / 2019

Transaction ID : A55E6D527CAFD4B0F98B

Amount of Each Receipt this Period
250.00

Memo Item
PERMISSIBLE FUNDS VERIFIED

SUBTOTAL of Receipts This Page (optional).....▶	3250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

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

Mailing Address PO BOX 18254

City: WASHINGTON State: DC Zip Code: 20036-8254

FEC ID number of contributing federal political committee: **C** C00280222

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt: 06 / 30 / 2019

Transaction ID : **ADE9DFD99C753466394D**

Amount of Each Receipt this Period: 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
L3 TECHNOLOGIES, INC. PAC

Mailing Address 600 3RD AVE

City: NEW YORK State: NY Zip Code: 10016-1901

FEC ID number of contributing federal political committee: **C** C00338087

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt: 06 / 30 / 2019

Transaction ID : **A5F20FB73984E4EB8985**

Amount of Each Receipt this Period: 5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
L3 TECHNOLOGIES, INC. PAC

Mailing Address 600 3RD AVE

City: NEW YORK State: NY Zip Code: 10016-1901

FEC ID number of contributing federal political committee: **C** C00338087

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt: 06 / 30 / 2019

Transaction ID : **A91B03956EC8D4EF1A67**

Amount of Each Receipt this Period: 5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 69 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES PAC

Mailing Address 2121 CRYSTAL DR
SUITE 100

City ARLINGTON State VA Zip Code 22202-3706

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2019

Transaction ID : AA1EA093203DC4B58929

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES PAC

Mailing Address 2121 CRYSTAL DR
SUITE 100

City ARLINGTON State VA Zip Code 22202-3706

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A5195A225E6EA4123997

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MAKING AMERICA PROSPEROUS PAC

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C** C00445379

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A1D22D0F68A80466DA9A

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

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 70 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARATHON PETROLEUM CORP EMPLOYEES PAC(MPAC)

Mailing Address 1201 F ST NW
STE 625

City WASHINGTON	State DC	Zip Code 20004-1256
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2019

Transaction ID : A88DCA9B3EAE84957A57

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MCDONALD'S PAC

Mailing Address 1099 NEW YORK AVENUE NW
SUITE 510

City WASHINGTON	State DC	Zip Code 20001-4493
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00063164

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 28 / 2019

Transaction ID : A796C09D089F9411FA65

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MESSER CONSTRUCTION CO PAC

Mailing Address 643 W COURT ST

City CINCINNATI	State OH	Zip Code 45203-1511
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00435990

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : A24837C57672C43CEBD2

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4500.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A

Mailing Address 200 PARK AVE

City NEW YORK	State NY	Zip Code 10166-0005
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **AC75119AE550146BD86E**

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MICHIGAN SUGAR COMPANY GROWERS PAC

Mailing Address 2800 SOUTH EUCLID AVE

City BAYCITY	State MI	Zip Code 48707
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00384354

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : **A2E3F05BA5E42C7AAB**

Amount of Each Receipt this Period
 1500.00

Memo Item

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

Mailing Address 901 K STREET NW
FLOOR 11

City WASHINGTON	State DC	Zip Code 20001-6441
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **A4AC3BFA2F4064C48B7E**

Amount of Each Receipt this Period
 2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	6000.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 72 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)

Mailing Address 7525 RED RIVER ROAD

City WAHPETON State ND Zip Code 58075-9705

FEC ID number of contributing federal political committee. **C** C00164939

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2019

Transaction ID : **A7D33D36C33DB4100B65**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MMC CORP PAC

Mailing Address 10955 LOWELL AVE
STE 350

City OVERLAND PARK State KS Zip Code 66210-2408

FEC ID number of contributing federal political committee. **C** C00509356

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **AA0353B5632624C42929**

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MVP HEALTH CARE, INC. FEDERAL PAC

Mailing Address 625 STATE STREET

City SCHENECTADY State NY Zip Code 12305-2111

FEC ID number of contributing federal political committee. **C** C00431429

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : **AA94934DA7C7B40DCBF1**

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

8000.00

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

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

FOR LINE NUMBER: PAGE 73 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOC. PAC (NATCA)
 Mailing Address 1325 MASSACHUSETTS AVENUE NW
 City WASHINGTON State DC Zip Code 20005-4171
 FEC ID number of contributing federal political committee. **C** C00238725
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019
Transaction ID : A8241980CD7984E9AB48
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL APARTMENT ASSOC. PAC(NAAPAC)
 Mailing Address 4300 WILSON BLVD
 SUITE 400
 City ARLINGTON State VA Zip Code 22203-4168
 FEC ID number of contributing federal political committee. **C** C00113241
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2019
Transaction ID : AF22012D9F8C94064948
 Amount of Each Receipt this Period
 2500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOC. REAL ESTATE INVESTMENT TRUSTS PAC(NAREIT)
 Mailing Address 1875 1 STREET, NW
 SUITE 600
 City WASHINGTON State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C** C00303339
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2019
Transaction ID : AA09D4483C8E64D4BB1B
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 8500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 74 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOC. SPINE SPECIALISTS PAC

Mailing Address 7075 VETERANS BLVD

City BARR RIDGE State IL Zip Code 60527-5614

FEC ID number of contributing federal political committee. **C** C00349225

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A8618182F59484E3C983

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT

City FALLS CHURCH State VA Zip Code 22042-1260

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : A6D570417D9EF4D7ABBB

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE PAC(NEMPAC)

Mailing Address 2121 K ST NW
STE 325

City WASHINGTON State DC Zip Code 20037-1886

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2019

Transaction ID : A96EC366D3D1F427890E

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 7500.00

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

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

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

FOR LINE NUMBER: PAGE 75 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL FUEL GAS FED (NFG) PAC
 Mailing Address 6363 MAIN ST
 City WILLIAMSVILLE State NY Zip Code 14221-5855
 FEC ID number of contributing federal political committee. **C** C00083758
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2019
Transaction ID : AAACC62EC59AB4A869BB
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL FUEL GAS FED (NFG) PAC
 Mailing Address 6363 MAIN ST
 City WILLIAMSVILLE State NY Zip Code 14221-5855
 FEC ID number of contributing federal political committee. **C** C00083758
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019
Transaction ID : A62570E93EA824F45B9A
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL GRID USA PAC
 Mailing Address 325 7TH STREET NW
 SUITE 225
 City WASHINGTON State DC Zip Code 20004-2830
 FEC ID number of contributing federal political committee. **C** C00048702
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019
Transaction ID : A9BE9E2C8ACF64AE0B91
 Amount of Each Receipt this Period
 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3500.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF)

Mailing Address 2107 WILSON BLVD
STE 600

City ARLINGTON State VA Zip Code 22201-3091

FEC ID number of contributing federal political committee. **C** C00325324

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : AF189DF3310DB4088960

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL MULTIFAMILY HOUSING COUNCIL PAC (NMHC PAC)

Mailing Address 1775 I ST NW
STE 1100

City WASHINGTON State DC Zip Code 20006-2424

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 22 / 2019

Transaction ID : AA224C7F092594895BFB

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Mailing Address 560 SYLVAN AVE

City ENGLEWOOD CLIFFS State NJ Zip Code 07632-3119

FEC ID number of contributing federal political committee. **C** C00521039

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 23 / 2019

Transaction ID : AAB4387CAF744456CB72

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4500.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ROOFING CONTRACTORS ASSOC.PAC (NRCA)

Mailing Address 324 4TH ST NE

City WASHINGTON	State DC	Zip Code 20002-5824
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00244863

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A7E263D144C094D839FD

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONWIDE MUTUAL INSURANCE COMPANY FINANCIAL & INVESTMENTS PAC

Mailing Address 1 NATIONWIDE PLZ
1-32-404

City COLUMBUS	State OH	Zip Code 43215-2226
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00406215

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A8F7E10B02D8F415B8BA

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONWIDE MUTUAL INSURANCE COMPANY PAC

Mailing Address 1 NATIONWIDE PLAZA

City COLUMBUS	State OH	Zip Code 43215-2226
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00406215

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : AC7A03AA3C79B4983906

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	_____ 4500.00
TOTAL This Period (last page this line number only).....▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 78 OF 150	
<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NIKE INC. PAC

Mailing Address 1 SW BOWERMAN DRIVE

City BEAVERTON	State OR	Zip Code 97005-0979
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00142786

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A4BBD50CC2B194906B86

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 2740 AIRPORT DR
STE 330

City COLUMBUS	State OH	Zip Code 43219-2286
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00488262

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2019

Transaction ID : AF895BB0A1F484E0DB1A

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NO LABELS PROBLEM SOLVERS PAC

Mailing Address 1130 CONNECTICUT AVE NW
STE 325

City WASHINGTON	State DC	Zip Code 20036-3999
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00629709

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : ADFBEF05A720045ABA0C

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NO LABELS PROBLEM SOLVERS PAC

Mailing Address 1130 CONNECTICUT AVE NW
STE 325

City WASHINGTON	State DC	Zip Code 20036-3999
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00629709

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A2830C03D8FEF4027BE7

Amount of Each Receipt this Period
 4000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NORTHWESTERN MUTUAL FEDERAL PAC

Mailing Address 720 E WISCONSIN AVE
RM 503

City MILWAUKEE	State WI	Zip Code 53202-4703
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00197095

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : AC8306B2871864B50B7F

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NUCLEAR ENERGY INSTITUTE (NEI)

Mailing Address 1201 F ST NW
STE 1100

City WASHINGTON	State DC	Zip Code 20004-1218
--------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : AE70390EE6C484328A5B

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	6000.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 OF 150
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
OB-GYN PAC

Mailing Address 409 12TH STREET SW

City WASHINGTON State DC Zip Code 20024-2125

FEC ID number of contributing federal political committee. **C** C00364158

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : AE40EB837A1D0482C9A8

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PACIFIC LIFE INSURANCE PAC

Mailing Address 700 NEWPORT CENTER DR

City NEWPORT BEACH State CA Zip Code 92660-6307

FEC ID number of contributing federal political committee. **C** C00068528

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : AFD81FD450FCE4C54BB1

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PCG EMPLOYEE OWNERS PAC

Mailing Address 11145 THOMPSON AVE

City LENEXA State KS Zip Code 66219-2302

FEC ID number of contributing federal political committee. **C** C00659060

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : A0AE41D6F7D714E99A40

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 5500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PECKHAM INDUSTRIES PAC

Mailing Address 20 HAARLEM AVE

City WHITE PLAINS	State NY	Zip Code 10603-2223
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00343681

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : A41393919758E4C2F889

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PLAINS COTTON GROWERS INC PAC

Mailing Address 4517 W LOOP 289

City LUBBOCK	State TX	Zip Code 79414-1235
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00599084

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 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 / 2019

Transaction ID : AB9063229656E4D36BB9

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

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

Mailing Address 1301 K STREET NW
SUITE 800

City WASHINGTON	State DC	Zip Code 20005-3317
--------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : ACE6CFB6D322D445285F

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 5500.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PRINCIPAL LIFE INSURANCE COMPANY PAC (PRINPAC)

Mailing Address 1350 I STREET NW

City WASHINGTON	State DC	Zip Code 20005-3305
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00128918

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : AB6621C65DE1646EF8D8

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PUBLIC SERVICE ENTERPRISE GROUP (PEGPAC)

Mailing Address 80 PARK PLZ
T7

City NEWARK	State NJ	Zip Code 07102-4109
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00383489

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : AF54A28E34C8E4CC58F3

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 WILSON BLVD
SUITE 1500

City ARLINGTON	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2019

Transaction ID : A91FBB7FA560740FC8BF

Amount of Each Receipt this Period
 _____ 5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 8000.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REPUBLICAN MAINSTREET PARTNERSHIP PAC

Mailing Address C/O G&W 2201 WISCONSIN AVE., NW
SUITE 320

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A3CBE1A38392A4DE9A98

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SILVIO PALERMO FOR SHERIFF

Mailing Address 6690 SETTERS RUN

City VICTOR	State NY	Zip Code 14564-9597
----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2019

Transaction ID : AFC98D6461DC24ECE9A2

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
 VERIFYING PERMISSIBLE FUNDS

C. Full Name (Last, First, Middle Initial)
SNAKE RIVER SUGAR CO PAC

Mailing Address 1951 S SATURN WAY
SUITE 100

City BOISE	State ID	Zip Code 83709
---------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2019

Transaction ID : A708CA32579DC4241B90

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	_____ 3250.00
TOTAL This Period (last page this line number only).....▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SOCIETY OF THORACIC SURGEONS PAC

Mailing Address 20 F ST NW
STE 310C

City WASHINGTON State DC Zip Code 20001-6700

FEC ID number of contributing federal political committee. **C** C00325936

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 14 / 2019

Transaction ID : A7381F5C855E94D1EBE6

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
THRIVENT FINANCIAL EMPLOYEE PAC (EPAC)

Mailing Address PO BOX 1892

City APPLETON State WI Zip Code 54912-1892

FEC ID number of contributing federal political committee. **C** C00121319

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : AE5C270AF3EBA479DA62

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA PAC

Mailing Address 325 7TH ST NW
STE 1000

City WASHINGTON State DC Zip Code 20004-2801

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 23 / 2019

Transaction ID : A2C86F2B2070B413C942

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	8500.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TRANSAMERICA CORPORATION PAC

Mailing Address 600 13TH ST NW
STE 400B

City WASHINGTON	State DC	Zip Code 20005-3008
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00236414

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A71FA2BB0A2C247079C3

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TUESDAY GROUP POLITICAL ACTION COMMITTEE

Mailing Address P. O. BOX 11586

City WASHINGTON	State DC	Zip Code 20008
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00433060

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : A72B64A6C65074C608BC

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
UA POLITICAL EDUCATION COMMITTEE PAC

Mailing Address 3 PARK PL

City ANNAPOLIS	State MD	Zip Code 21401-3687
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2019

Transaction ID : A784430D987E64B468C9

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	8500.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 86 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2019

Transaction ID : **A9FE284698CFF4F3297D**

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC

Mailing Address 9800 FREDERICKSBURG RD

City SAN ANTONIO State TX Zip Code 78288-0001

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2019

Transaction ID : **AB431965F648D4A30B94**

Amount of Each Receipt this Period
 5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
UNITED TECHNOLOGIES EMPLOYEE PAC (UTC)

Mailing Address 1101 PENNSYLVANIA AVENUE NW
 FLOOR 10

City WASHINGTON State DC Zip Code 20004-2566

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2019

Transaction ID : **A33CB0894EEB0411ABEB**

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 8500.00

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

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

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

FOR LINE NUMBER: PAGE 87 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UPSPAC

Mailing Address 316 PENNSYLVANIA AVE SE
STE 300

City WASHINGTON State DC Zip Code 20003-1173

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **A3FCD887555EF4AAA9E3**

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WAL-MART STORES PAC (WALPAC)

Mailing Address 701 8TH STREET NW
SUITE 200

City WASHINGTON State DC Zip Code 20001-3917

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2019

Transaction ID : **AAC54DF38667F4FE5A83**

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 801 PENNSYLVANIA AVENUE NW
SUITE 212

City WASHINGTON State DC Zip Code 20004-2677

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2019

Transaction ID : **A0C226033C67243669B7**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00

TOTAL This Period (last page this line number only)..... ▶ 277000.00

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

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

FOR LINE NUMBER: PAGE 88 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HRW VICTORY FUND

Mailing Address 824 S MILLEDGE AVE
STE 101

City: ATHENS State: GA Zip Code: 30605-1332

FEC ID number of contributing federal political committee: **C** C00703991

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5129.56

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **AE3702DF896D840FD80D**

Amount of Each Receipt this Period
5129.56

Memo Item
TRANSFER OF NET JFC FUNDS

B. Full Name (Last, First, Middle Initial)
KENNEDY, LESA, D., MS.,

Mailing Address 1 DAYTONA BLVD

City: DAYTONA BEACH State: FL Zip Code: 32114-1212

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

Name of Employer: Occupation:
INTERNATIONAL SPEEDWAY CORPORATION CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **A0D6A00421BBF44CCBA8**

Amount of Each Receipt this Period
2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KENNEDY, LESA, D., MS.,

Mailing Address 1 DAYTONA BLVD

City: DAYTONA BEACH State: FL Zip Code: 32114-1212

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

Name of Employer: Occupation:
INTERNATIONAL SPEEDWAY CORPORATION CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : **A446BFA69697A482E8E4**

Amount of Each Receipt this Period
2800.00

Memo Item

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

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

5129.56

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 89 OF 150	
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REED VICTORY COMMITTEE

Mailing Address 824 S MILLEDGE AVE STE 101

City ATHENS	State GA	Zip Code 30605
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00635052

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
94218.13

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : AF448CB5E4AD041BE907

Amount of Each Receipt this Period
16280.78

Memo Item
TRANSFER OF NET JFC FUNDS

B. Full Name (Last, First, Middle Initial)
AMERICAN HOTEL AND LODGING ASSOCIATION PAC ('HOTELPAC')

Mailing Address 1250 I ST NW
STE 1100

City WASHINGTON	State DC	Zip Code 20005-5904
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00001198

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A86A5CB4CA0E941B2B3F

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 1250 CONNECTICUT AVE NW
STE 400

City WASHINGTON	State DC	Zip Code 20036-2660
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00408260

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A06DBA1DE959B4AB69AA

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	16280.78
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 90 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN HOTEL AND LODGING ASSOCIATION PAC ('HOTELPAC')

Mailing Address 1250 I ST NW
STE 1100

City WASHINGTON State DC Zip Code 20005-5904

FEC ID number of contributing federal political committee. **C** C00001198

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : AAC24082882FB4D81872

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
REED VICTORY COMMITTEE

Mailing Address 824 S MILLEDGE AVE STE 101

City ATHENS State GA Zip Code 30605

FEC ID number of contributing federal political committee. **C** C00635052

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
94218.13

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A4613DB0246DA491DBFA

Amount of Each Receipt this Period
5400.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FRESENIUS MEDICAL CARE NORTH AMERICA PAC

Mailing Address 801 PENNSYLVANIA AVENUE NW
SUITE 255

City WASHINGTON State DC Zip Code 20004-3637

FEC ID number of contributing federal political committee. **C** C00401299

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : AF3D2380FE1014157930

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5400.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SINE, JEFFREY, , ,

Mailing Address 205 E 85TH ST
PH 2CD

City NEW YORK State NY Zip Code 10028-3221

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

Name of Employer THE RAINE GROUP Occupation CO-FOUNDING PARTNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A930F1082F6AC4F10BAA**

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SINE, JEFFREY, , ,

Mailing Address 205 E 85TH ST
PH 2CD

City NEW YORK State NY Zip Code 10028-3221

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

Name of Employer THE RAINE GROUP Occupation CO-FOUNDING PARTNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A2FC3BA2070E04C599EA**

Amount of Each Receipt this Period
2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TAKE BACK THE HOUSE 2020

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C** C00695585

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
101669.94

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : **A93577E29616540309E5**

Amount of Each Receipt this Period
7385.30

Memo Item
TRANSFER OF NET JFC FUNDS

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

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

7385.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REYNOLDS, ROBERT, , ,

Mailing Address 153 GARFIELD RD

City: CONCORD State: MA Zip Code: 01742-4905

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

Name of Employer: PUTNAM INVESTMENTS Occupation: MONEY MANAGEMENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 5600.00

Date of Receipt: 03 / 29 / 2019

Transaction ID : **A5DF0EB20A1ED4A328B2**

Amount of Each Receipt this Period: 2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ASPECT HOLDINGS

Mailing Address 8806 HARNESS CREEK LANE

City: HOUSTON State: TX Zip Code: 77024-7043

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

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 3577.19

Date of Receipt: 03 / 29 / 2019

Transaction ID : **A648C5983CDD245C181C**

Amount of Each Receipt this Period: 777.19

Memo Item

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

Mailing Address 8806 HARNESS CREEK LANE

City: HOUSTON State: TX Zip Code: 77024-7043

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

Name of Employer: ASPECT HOLDINGS Occupation: PARTNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 3577.19

Date of Receipt: 03 / 29 / 2019

Transaction ID : **A8ABCD88769E94F3BBED**

Amount of Each Receipt this Period: 777.19

Memo Item

MEMO FOR ASPECT HOLDINGS

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 150
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WARREN, KELCY, L., ,

Mailing Address 8111 WESTCHESTER DRIVE STE 700

City DALLAS	State TX	Zip Code 75225-6143
----------------	-------------	------------------------

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

Name of Employer ENERGY TRANSFER	Occupation CHAIRMAN & CEO
-------------------------------------	------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2019

Transaction ID : AE7DAB9A27DFC44BEB01

Amount of Each Receipt this Period
2477.59

Memo Item

B. Full Name (Last, First, Middle Initial)
MOSKOWITZ, CHERNA, , MS.,

Mailing Address 4744 N BAY RD

City MIAMI BEACH	State FL	Zip Code 33140-2814
---------------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation PROPERTY MANAGEMENT
-----------------------------------	-----------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2019

Transaction ID : A3F1A4D53AEB4498B82B

Amount of Each Receipt this Period
2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TAKE BACK THE HOUSE 2020

Mailing Address PO BOX 30844

City BETHESDA	State MD	Zip Code 20824-0844
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00695585

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
101669.94

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : A274F0F6893C44A9FB43

Amount of Each Receipt this Period
20436.04

Memo Item
TRANSFER OF NET JFC FUNDS

SUBTOTAL of Receipts This Page (optional).....▶	20436.04
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 94 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REYNOLDS, ROBERT, , ,

Mailing Address 153 GARFIELD RD

City CONCORD State MA Zip Code 01742-4905

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

Name of Employer PUTNAM INVESTMENTS Occupation MONEY MANAGEMENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2019

Transaction ID : **ABA3275B9FDF748DE93B**

Amount of Each Receipt this Period
2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ASPECT HOLDINGS

Mailing Address 8806 HARNESS CREEK LANE

City HOUSTON State TX Zip Code 77024-7043

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3577.19

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2019

Transaction ID : **A1941877CA0544DBC8E5**

Amount of Each Receipt this Period
2800.00

Memo Item

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

Mailing Address 8806 HARNESS CREEK LANE

City HOUSTON State TX Zip Code 77024-7043

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

Name of Employer ASPECT HOLDINGS Occupation PARTNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3577.19

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2019

Transaction ID : **AD5AD68FAB2F84A87911**

Amount of Each Receipt this Period
2800.00

Memo Item

MEMO FOR ASPECT HOLDINGS

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

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

0.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LAKE, DIANE, , ,

Mailing Address 1200 TAM O SHANTER DR

City BAKERSFIELD State CA Zip Code 93309-2455

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
233.33

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2019

Transaction ID : **A1E2772A01C6E421F8A5**

Amount of Each Receipt this Period
233.33

Memo Item

B. Full Name (Last, First, Middle Initial)
ARGYROS, JULIANNE, , ,

Mailing Address 949 S COAST DR STE 600

City COSTA MESA State CA Zip Code 92626-7734

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

Name of Employer ARGYROS FOUNDATION Occupation PRESIDENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1384.21

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 28 / 2019

Transaction ID : **ABC1FF8AB994D494AAB6**

Amount of Each Receipt this Period
1384.21

Memo Item

C. Full Name (Last, First, Middle Initial)
BROWN, W.L., LYONS, , JR.

Mailing Address 1 DRIFTWOOD LANDING RD

City DELRAY BEACH State FL Zip Code 33483-7221

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2418.57

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2019

Transaction ID : **AF9A4C536BE04485DBB7**

Amount of Each Receipt this Period
877.19

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 96 OF 150

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GROFF, SUSAN, L., ,
 Mailing Address 9832 CALVIN AVE
 City NORTHRIDGE State CA Zip Code 91324-1619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1838.47

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2019
Transaction ID : A30BB6B31FB0B42B3956
 Amount of Each Receipt this Period
 892.86
 Memo Item

B. Full Name (Last, First, Middle Initial)
SINE, JEFFREY, , ,
 Mailing Address 205 E 85TH ST
 PH 2CD
 City NEW YORK State NY Zip Code 10028-3221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE RAINE GROUP Occupation CO-FOUNDING PARTNER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2019
Transaction ID : A4BCD88FDB8CC435A960
 Amount of Each Receipt this Period
 2700.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
CHANDI, NACHHATTAR, , ,
 Mailing Address 42270 SPECTRUM ST
 City INDIO State CA Zip Code 92203-9513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHANDI GROUP USA, INC. Occupation OWNER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 945.62

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2019
Transaction ID : ABCE9CDAC43F74654928
 Amount of Each Receipt this Period
 945.62
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 150
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RYAN, GEORGE, BRINT, ,

Mailing Address 10430 STRAIT LN

City DALLAS	State TX	Zip Code 75229-6536
----------------	-------------	------------------------

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

Name of Employer RYAN, INC.	Occupation FOUNDER
--------------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2748.21

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2019

Transaction ID : A27B77AB21E5E4A40BA0

Amount of Each Receipt this Period
2748.21

Memo Item

B. Full Name (Last, First, Middle Initial)
GRAY, C. BOYDEN, , ,

Mailing Address 1534 28TH ST NW

City WASHINGTON	State DC	Zip Code 20007-3058
--------------------	-------------	------------------------

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

Name of Employer BOYDEN GRAY & ASSOCIATES	Occupation ATTORNEY
--	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1121.06

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2019

Transaction ID : A6244B88154174F6D9CE

Amount of Each Receipt this Period
1121.06

Memo Item

C. Full Name (Last, First, Middle Initial)
MOSKOWITZ, CHERNA, , MS.,

Mailing Address 4744 N BAY RD

City MIAMI BEACH	State FL	Zip Code 33140-2814
---------------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation PROPERTY MANAGEMENT
-----------------------------------	-----------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2019

Transaction ID : AA83100F9B24E4152B53

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	54631.68

**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 98 OF 150	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SMART MEDIA GROUP

Mailing Address 1427 LESLIE AVENUE
SUITE 100

City ALEXANDRIA State VA Zip Code 22301-1618

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1461.34

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : **AD011B66F372040309E0**

Amount of Each Receipt this Period
1461.34

Memo Item
REFUND OF OVERPAYMENT

B. Full Name (Last, First, Middle Initial)
SPECTRUM (TIME WARNER)-CORNING/GENEVA

Mailing Address PO BOX 70872

City CHARLOTTE State NC Zip Code 28272-0872

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
305.98

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 14 / 2019

Transaction ID : **A96F46344FAD64F87BF1**

Amount of Each Receipt this Period
201.00

Memo Item
REFUND OF OVERPAYMENT

C. Full Name (Last, First, Middle Initial)
TRAVELERS CL REMITTANCE CENTER

Mailing Address PO BOX 6603217

City DALLAS State TX Zip Code 75266

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1487.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 14 / 2019

Transaction ID : **AA10F48123B734F629A7**

Amount of Each Receipt this Period
828.00

Memo Item
REFUND OF OVERPAYMENT

SUBTOTAL of Receipts This Page (optional)..... ▶	2490.34
TOTAL This Period (last page this line number only)..... ▶	2490.34

**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 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ACQUIRE DIGITAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019		
Mailing Address 512A EAST IRIS DRIVE			FEC Identification Number C		
City NASHVILLE	State TN	Zip Code 37204-3110	Amount of Each Disbursement this Period 19500.00		
Purpose of Disbursement MEDIA CONSULTING		Category/ Type 004	Transaction ID : B24AF48E0C22B4DA1968		
Candidate Name		Memo Item <input type="checkbox"/>			
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. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2019		
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 112.30		
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : B549DF23A42614EF18BF		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2019		
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 2.30		
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : B21A14A06677C4A17880		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	19614.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2019
Mailing Address 5555 HILTON AVE STE 106		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70808-2597
Purpose of Disbursement TRANSACTION FEES		003
Candidate Name		Amount of Each Disbursement this Period 359.20
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) ▼	Transaction ID : B7310394A596849B292E
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2019
Mailing Address 5555 HILTON AVE STE 106		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70808-2597
Purpose of Disbursement TRANSACTION FEES		003
Candidate Name		Amount of Each Disbursement this Period 471.90
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) ▼	Transaction ID : BCBAD8A303ACC42BE929
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2019
Mailing Address 5555 HILTON AVE STE 106		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70808-2597
Purpose of Disbursement TRANSACTION FEES		003
Candidate Name		Amount of Each Disbursement this Period 76.90
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) ▼	Transaction ID : B0EAEAD8018BF4F0DA18
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	908.00
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 101 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2019		
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 1904.00		
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : B154B146BBC474263A02		
Candidate Name		Memo Item <input type="checkbox"/>			
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. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2019		
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 244.90		
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : BFAF3620FB3784801BE9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2019		
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 489.20		
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : BACD09BB48C954FCE896		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....▶	2638.10
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2019	
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 112.30	
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : BE4EC3F945AAE43839DF	
Candidate Name		Memo Item <input type="checkbox"/>		
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. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2019	
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 60.30	
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : BA23A4A0B925F4C84B6E	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2019	
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 40.30	
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : BA37C5A86EEB047BFB9E	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	212.90
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 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement MM / DD / YYYY 06 / 20 / 2019	
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 22.90	
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : BEF51253F83A64658A4C	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ANEDOT			Date of Disbursement MM / DD / YYYY 06 / 24 / 2019	
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 40.30	
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : B58D89AE5D9024C25AD5	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement MM / DD / YYYY 06 / 30 / 2019	
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 5.30	
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : BA93922EEC74644E5B14	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	68.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2019		
Mailing Address 5555 HILTON AVE STE 106			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70808-2597	Amount of Each Disbursement this Period 272.80		
Purpose of Disbursement TRANSACTION FEES		Category/ Type 003	Transaction ID : BAC90A19276DE4DEB96E		
Candidate Name		Memo Item <input type="checkbox"/>			
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. ARISTOTLE INTERNATIONAL INC.			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019		
Mailing Address 205 PENNSYLVANIA AVENUE SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-1164	Amount of Each Disbursement this Period 3450.00		
Purpose of Disbursement DATABASE SOFTWARE		Category/ Type 003	Transaction ID : B7EBE804825EB497DBF9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. CHAUTAUQUA COUNTY CONSERVATIVE COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2019		
Mailing Address 3105 CABLE RD			FEC Identification Number C		
City FREDONIA	State NY	Zip Code 14063-9758	Amount of Each Disbursement this Period 525.00		
Purpose of Disbursement EVENT TICKET		Category/ Type	Transaction ID : B4FB476227C914F9699A		
Candidate Name CHAUTAUQUA COUNTY CONSERVATIVE COMMITTEE		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	4247.80
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHAUTAUQUA COUNTY REPUBLICAN COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2019	
Mailing Address 39 NORTON AVE			FEC Identification Number C	
City JAMESTOWN	State NY	Zip Code 14701-6321	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement EVENT TICKET		Category/ Type 004	Transaction ID : BF3CCE53A81FF48E396E	
Candidate Name CHAUTAUQUA COUNTY REPUBLICAN COMMITTEE		Memo Item <input type="checkbox"/>		
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. CHAUTAUQUA COUNTY REPUBLICAN COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2019	
Mailing Address 39 NORTON AVE			FEC Identification Number C	
City JAMESTOWN	State NY	Zip Code 14701-6321	Amount of Each Disbursement this Period 175.00	
Purpose of Disbursement ADVERTISING		Category/ Type 004	Transaction ID : BD7947C80A52C426B9D6	
Candidate Name CHAUTAUQUA COUNTY REPUBLICAN COMMITTEE		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. COKER, MATTHEW, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2019	
Mailing Address 2410 ELLIOTT AVE APT 651			FEC Identification Number C	
City NASHVILLE	State TN	Zip Code 37204-2568	Amount of Each Disbursement this Period 207.55	
Purpose of Disbursement SALARY		Category/ Type	Transaction ID : BDD1099CEC06D4B3CA81	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	482.55
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 106 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COKER, MATTHEW, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2019		
Mailing Address 2410 ELLIOTT AVE APT 651			FEC Identification Number C		
City NASHVILLE	State TN	Zip Code 37204-2568			
Purpose of Disbursement SALARY		Category/ Type	Amount of Each Disbursement this Period 2922.74		
Candidate Name			Transaction ID : BC652DE98038244FA9A9		
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) B. COKER, MATTHEW, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2019		
Mailing Address 2410 ELLIOTT AVE APT 651			FEC Identification Number C		
City NASHVILLE	State TN	Zip Code 37204-2568			
Purpose of Disbursement SALARY		Category/ Type	Amount of Each Disbursement this Period 907.67		
Candidate Name			Transaction ID : B995CA5F34144406FAFF		
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) C. COKER, MATTHEW, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2019		
Mailing Address 2410 ELLIOTT AVE APT 651			FEC Identification Number C		
City NASHVILLE	State TN	Zip Code 37204-2568			
Purpose of Disbursement SALARY		Category/ Type	Amount of Each Disbursement this Period 3130.29		
Candidate Name			Transaction ID : BCA94DE5E431F4B00BAD		
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	6960.70
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COKER, MATTHEW, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2019	
Mailing Address 2410 ELLIOTT AVE APT 651			FEC Identification Number C	
City NASHVILLE	State TN	Zip Code 37204-2568	Amount of Each Disbursement this Period 3130.29	
Purpose of Disbursement SALARY		Category/Type	Transaction ID : BC07E2BA9683F4CACBC5	
Candidate Name		Memo Item <input type="checkbox"/>		
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. COKER, MATTHEW, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2019	
Mailing Address 2410 ELLIOTT AVE APT 651			FEC Identification Number C	
City NASHVILLE	State TN	Zip Code 37204-2568	Amount of Each Disbursement this Period 3130.29	
Purpose of Disbursement SALARY		Category/Type	Transaction ID : B622F780DC40741FE8D8	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. DAUGHERTY, ABBEY, A., ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2019	
Mailing Address 520 12TH ST S APT 1545			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22202-4272	Amount of Each Disbursement this Period 378.53	
Purpose of Disbursement SALARY		Category/Type 001	Transaction ID : BAC548B40F305453E83E	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	6639.11
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 108 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DAUGHERTY, ABBEY, A., ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2019		
Mailing Address 520 12TH ST S APT 1545			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22202-4272	Amount of Each Disbursement this Period 378.53		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : BF73E6F871F774FAC894		
Candidate Name		Memo Item <input type="checkbox"/>			
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. DAUGHERTY, ABBEY, A., ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2019		
Mailing Address 520 12TH ST S APT 1545			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22202-4272	Amount of Each Disbursement this Period 378.53		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : BA3C31C45FCBC43F6886		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. DAUGHERTY, ABBEY, A., ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2019		
Mailing Address 520 12TH ST S APT 1545			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22202-4272	Amount of Each Disbursement this Period 378.53		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : BC1CE1CE9269445B4847		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1135.59
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 109 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DAUGHERTY, ABBEY, A., ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2019		
Mailing Address 520 12TH ST S APT 1545			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22202-4272	Amount of Each Disbursement this Period 378.53		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : BDDBB777CF54D4695878		
Candidate Name		Memo Item <input type="checkbox"/>			
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. DAUGHERTY, ABBEY, A., ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2019		
Mailing Address 520 12TH ST S APT 1545			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22202-4272	Amount of Each Disbursement this Period 329.52		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : BD2CD81A264E3486BBBD		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. DIRECT RESPONSE STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2019		
Mailing Address 228 S WASHINGTON STREET SUITE B30			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22314-5409	Amount of Each Disbursement this Period 25378.11		
Purpose of Disbursement DIRECT MAIL PRINTING		Category/ Type 003	Transaction ID : B15F53FD2880A43A3807		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	26086.16
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 110 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DIRECT RESPONSE STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2019
Mailing Address 228 S WASHINGTON STREET SUITE B30		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314-5409
Purpose of Disbursement DIRECT MAIL PRINTING	Category/Type 003	
Candidate Name		Amount of Each Disbursement this Period 25476.59
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:	Transaction ID : BF281C648157C45BF846	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. DIRECT RESPONSE STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2019
Mailing Address 228 S WASHINGTON STREET SUITE B30		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314-5409
Purpose of Disbursement DIRECT MAIL PRINTING	Category/Type 003	
Candidate Name		Amount of Each Disbursement this Period 663.99
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:	Transaction ID : B877325A4AB4F47A986D	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. EMPIRE ACCESS		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2019
Mailing Address PO BOX 349		FEC Identification Number C
City PRATTSBURGH	State NY	Zip Code 14873-0349
Purpose of Disbursement INTERNET SERVICE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 191.86
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:	Transaction ID : BAFC03378D74A4F23BA5	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	26332.44
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 111 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EMPIRE ACCESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2019
Mailing Address PO BOX 349		FEC Identification Number C
City PRATTSBURGH	State NY	Zip Code 14873-0349
Purpose of Disbursement INTERNET SERVICE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 191.86
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:	Transaction ID : B207772ED54094CFDBB4 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. EPIPHANY PRODUCTIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2019
Mailing Address 1727 KING ST STE 300		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314-2761
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 10000.00
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:	Transaction ID : B9C854D1B78E347DFBDE <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. EPIPHANY PRODUCTIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2019
Mailing Address 1727 KING ST STE 300		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314-2761
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 5000.00
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:	Transaction ID : BB84B6FFBEBEBCD4A24B84 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	15191.86
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 112 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EPIPHANY PRODUCTIONS, INC.			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2019		
Mailing Address 1727 KING ST STE 300			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22314-2761	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B3BF4060856AA4B4BADC		
Candidate Name		Memo Item <input type="checkbox"/>			
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. FLY COMMUNICATION			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019		
Mailing Address 575 EIGHTH AVE 19TH FLOOR			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10018	Amount of Each Disbursement this Period 3375.00		
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type 001	Transaction ID : BDE5ACD9293C0447994F		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. FLY COMMUNICATION			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2019		
Mailing Address 575 EIGHTH AVE 19TH FLOOR			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10018	Amount of Each Disbursement this Period 25000.00		
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type 001	Transaction ID : BC5DE5A1C006549BE913		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	33375.00
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 113 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FLY COMMUNICATION			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2019		
Mailing Address 575 EIGHTH AVE 19TH FLOOR			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10018	Amount of Each Disbursement this Period 25000.00		
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type 001	Transaction ID : BAA9B86EB4753412890A		
Candidate Name		Memo Item <input type="checkbox"/>			
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. GRAPHIC SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2019		
Mailing Address 100 VILLAGE SQUARE			FEC Identification Number C		
City PAINTED POST	State NY	Zip Code 14870-1348	Amount of Each Disbursement this Period 221.40		
Purpose of Disbursement PRINTING		Category/ Type 003	Transaction ID : BD1A49D9856074487B5F		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. GRAPHIC SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2019		
Mailing Address 100 VILLAGE SQUARE			FEC Identification Number C		
City PAINTED POST	State NY	Zip Code 14870-1348	Amount of Each Disbursement this Period 75.00		
Purpose of Disbursement PRINTING		Category/ Type 003	Transaction ID : B0205821C89CD44A1867		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	25296.40
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 114 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HORNELL CITY REPUBLICAN COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2019		
Mailing Address 9 W VANSCOTER ST			FEC Identification Number C		
City HORNELL	State NY	Zip Code 14843-2119	Amount of Each Disbursement this Period 365.00		
Purpose of Disbursement EVENT TICKET		Category/ Type 001	Transaction ID : B15062BC2403A4CFBA8C		
Candidate Name HORNELL CITY REPUBLICAN COMMITTEE		Memo Item <input type="checkbox"/>			
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. I360, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2019		
Mailing Address 29374 NETWORK PLACE			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60673-1293	Amount of Each Disbursement this Period 2002.76		
Purpose of Disbursement DATA SUBSCRIPTION		Category/ Type 001	Transaction ID : B2C0D17566C164507B88		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. I360, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2019		
Mailing Address 29374 NETWORK PLACE			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60673-1293	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement DATA SUBSCRIPTION		Category/ Type 001	Transaction ID : BA6C50461C6DE4E67B48		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3367.76
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. I360, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2019
Mailing Address 29374 NETWORK PLACE		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60673-1293
Purpose of Disbursement DATA SUBSCRIPTION	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1000.00
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:	Transaction ID : B30486DAD98754E00B1E <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. JONES DAY		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2019
Mailing Address 51 LOUISIANA AVE NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001-2105
Purpose of Disbursement LEGAL FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2512.50
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:	Transaction ID : B9CD97670175840379C8 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. JONES DAY		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2019
Mailing Address 51 LOUISIANA AVE NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001-2105
Purpose of Disbursement LEGAL FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2825.00
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:	Transaction ID : BCDE3DCBAFBB6481F893 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	6337.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KAPPRINT			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2019		
Mailing Address 812 SAN ANTONIO STT SUITE 505			FEC Identification Number C		
City AUSTIN	State TX	Zip Code 78701	Amount of Each Disbursement this Period 2225.96		
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : B1672A4F202D14FFA8C6		
Candidate Name		Memo Item <input type="checkbox"/>			
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. KILLBUCK STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2019		
Mailing Address 71 EAST MARKET ST SUITE 201			FEC Identification Number C		
City CORNING	State NY	Zip Code 14830-2708	Amount of Each Disbursement this Period 6510.00		
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : BC83C836D212E4B3DAB8		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. KILLBUCK STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2019		
Mailing Address 71 EAST MARKET ST SUITE 201			FEC Identification Number C		
City CORNING	State NY	Zip Code 14830-2708	Amount of Each Disbursement this Period 15971.05		
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : BE901149B025241A6BD5		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	24707.01
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KILLBUCK STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2019	
Mailing Address 71 EAST MARKET ST SUITE 201			FEC Identification Number C	
City CORNING	State NY	Zip Code 14830-2708	Amount of Each Disbursement this Period 17414.48	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : BBB56F221F5F845329CE	
Candidate Name		Memo Item <input type="checkbox"/>		
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. LIBERTY STRATEGIES, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2019	
Mailing Address 181 SPRINGFIELD AVE			FEC Identification Number C	
City TONAWANDA	State NY	Zip Code 14150-9119	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : B6C88DE0CD4A54EE9B60	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. LIBERTY STRATEGIES, LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2019	
Mailing Address 181 SPRINGFIELD AVE			FEC Identification Number C	
City TONAWANDA	State NY	Zip Code 14150-9119	Amount of Each Disbursement this Period 3252.29	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : B4468ADCD4EBE4B96A52	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	22666.77
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 118 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LIBERTY STRATEGIES, LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2019		
Mailing Address 181 SPRINGFIELD AVE			FEC Identification Number C		
City TONAWANDA	State NY	Zip Code 14150-9119	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : B05D513DE041149A3AE3		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. MCCARTHY ADVANCED CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2019		
Mailing Address 80 M STREET SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-3544	Amount of Each Disbursement this Period 6000.00		
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : B6700CDBA71224B89B68		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. MONROE COUNTY CONSERVATIVE PARTY			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2019		
Mailing Address 7 STATE ST			FEC Identification Number C		
City PITTSFORD	State NY	Zip Code 14534-2027	Amount of Each Disbursement this Period 990.00		
Purpose of Disbursement EVENT TICKETS		Category/ Type	Transaction ID : B3098537DE0DE4E36804		
Candidate Name MONROE COUNTY CONSERVATIVE PARTY			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	8990.00
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 119 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MONROE COUNTY CONSERVATIVE PARTY			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2019
Mailing Address 7 STATE ST			FEC Identification Number C
City PITTSFORD	State NY	Zip Code 14534-2027	Amount of Each Disbursement this Period 300.00
Purpose of Disbursement ADVERTISING		Category/Type	Transaction ID : B2B57B2F012024AC2836
Candidate Name MONROE COUNTY CONSERVATIVE PARTY		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. PITIFER, MARK, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2019
Mailing Address 33 NAGEL PL			FEC Identification Number C
City GENEVA	State NY	Zip Code 14456-2516	Amount of Each Disbursement this Period 750.00
Purpose of Disbursement FIELD CONSULTING		Category/Type 001	Transaction ID : B47D45A5EAD284C709CF
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. PROFESSIONAL DATA SERVICES, INC.			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2019
Mailing Address 824 S MILLEDGE AVE STE 101			FEC Identification Number C
City ATHENS	State GA	Zip Code 30605	Amount of Each Disbursement this Period 2601.38
Purpose of Disbursement COMPLIANCE SERVICES		Category/Type 001	Transaction ID : BC3B519948AAA44B4B4F
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3651.38
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 120 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELTER POINT LIFE			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2019	
Mailing Address 1225 FRANKLIN AVE SUITE 475			FEC Identification Number C	
City GARDEN CITY	State NY	Zip Code 11530-1650	Amount of Each Disbursement this Period 423.21	
Purpose of Disbursement INSURANCE		Category/ Type 001	Transaction ID : BA524CE48DE2440A1B5C	
Candidate Name		Memo Item <input type="checkbox"/>		
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. STULL, ANN, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2019	
Mailing Address 3461 COUNTY ROUTE 2			FEC Identification Number C	
City ADDISON	State NY	Zip Code 14801-9409	Amount of Each Disbursement this Period 375.00	
Purpose of Disbursement FIELD CONSULTING		Category/ Type	Transaction ID : B0CCBFBEAFFFF444F8BD	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. THE ROCKWELL CENTER			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2019	
Mailing Address 248 CEDAR ST			FEC Identification Number C	
City CORNING	State NY	Zip Code 14830-3128	Amount of Each Disbursement this Period 1025.00	
Purpose of Disbursement RENT		Category/ Type	Transaction ID : BD17AF846F77347A3A66	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1823.21
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 121 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE ROCKWELL CENTER			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2019	
Mailing Address 248 CEDAR ST			FEC Identification Number C	
City CORNING	State NY	Zip Code 14830-3128	Amount of Each Disbursement this Period 1025.00	
Purpose of Disbursement RENT		Category/ Type	Transaction ID : B2CD2D6E7B5F04540909	
Candidate Name		Memo Item <input type="checkbox"/>		
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. THE ROCKWELL CENTER			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2019	
Mailing Address 248 CEDAR ST			FEC Identification Number C	
City CORNING	State NY	Zip Code 14830-3128	Amount of Each Disbursement this Period 1025.00	
Purpose of Disbursement RENT		Category/ Type	Transaction ID : B09D90A766E954C32943	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. USA PAYROLL			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2019	
Mailing Address 2601 LAC DE VILLE BLVD			FEC Identification Number C	
City ROCHESTER	State NY	Zip Code 14618-5644	Amount of Each Disbursement this Period 122.44	
Purpose of Disbursement PAYROLL TAXES		Category/ Type	Transaction ID : B02D53AF494284188A2A	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2172.44
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 122 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USA PAYROLL		Date of Disbursement
Mailing Address 2601 LAC DE VILLE BLVD		M M / D D / Y Y Y Y 04 / 01 / 2019
City ROCHESTER	State NY	Zip Code 14618-5644
Purpose of Disbursement PAYROLL EXPENSES		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 37.55
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) ▼	Transaction ID : B52EDA6504C6B43CDB31
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. USA PAYROLL		Date of Disbursement
Mailing Address 2601 LAC DE VILLE BLVD		M M / D D / Y Y Y Y 04 / 15 / 2019
City ROCHESTER	State NY	Zip Code 14618-5644
Purpose of Disbursement PAYROLL EXPENSE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 12.44
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) ▼	Transaction ID : B222AFEF9C473426A87E
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. USA PAYROLL		Date of Disbursement
Mailing Address 2601 LAC DE VILLE BLVD		M M / D D / Y Y Y Y 04 / 15 / 2019
City ROCHESTER	State NY	Zip Code 14618-5644
Purpose of Disbursement PAYROLL TAXES		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 1081.53
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) ▼	Transaction ID : BA39821C4E89D416483B
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1131.52
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 123 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USA PAYROLL		Date of Disbursement
Mailing Address 2601 LAC DE VILLE BLVD		M M / D D / Y Y Y Y 04 / 30 / 2019
City ROCHESTER	State NY	Zip Code 14618-5644
Purpose of Disbursement PAYROLL EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	22.00
State: District:	Transaction ID : B076715BD5E8948219A7	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. USA PAYROLL		Date of Disbursement
Mailing Address 2601 LAC DE VILLE BLVD		M M / D D / Y Y Y Y 04 / 30 / 2019
City ROCHESTER	State NY	Zip Code 14618-5644
Purpose of Disbursement PAYROLL TAXES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	201.83
State: District:	Transaction ID : BD38E3948773B4C1699E	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. USA PAYROLL		Date of Disbursement
Mailing Address 2601 LAC DE VILLE BLVD		M M / D D / Y Y Y Y 05 / 01 / 2019
City ROCHESTER	State NY	Zip Code 14618-5644
Purpose of Disbursement PAYROLL EXPENSES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	60.59
State: District:	Transaction ID : B440035AC94DA452B860	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	284.42
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 124 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USA PAYROLL		Date of Disbursement
Mailing Address 2601 LAC DE VILLE BLVD		M M / D D / Y Y Y Y 05 / 01 / 2019
City ROCHESTER	State NY	Zip Code 14618-5644
Purpose of Disbursement PAYROLL TAXES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	122.44
State: District:	Transaction ID : BC744A6E005534D86BBA	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. USA PAYROLL		Date of Disbursement
Mailing Address 2601 LAC DE VILLE BLVD		M M / D D / Y Y Y Y 05 / 15 / 2019
City ROCHESTER	State NY	Zip Code 14618-5644
Purpose of Disbursement PAYROLL EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	6.50
State: District:	Transaction ID : B80EFA38B95042FF966	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. USA PAYROLL		Date of Disbursement
Mailing Address 2601 LAC DE VILLE BLVD		M M / D D / Y Y Y Y 05 / 15 / 2019
City ROCHESTER	State NY	Zip Code 14618-5644
Purpose of Disbursement PAYROLL TAXES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	1103.28
State: District:	Transaction ID : BCD828BF1DAB0406F884	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1232.22
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 125 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USA PAYROLL			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2019		
Mailing Address 2601 LAC DE VILLE BLVD			FEC Identification Number C		
City ROCHESTER	State NY	Zip Code 14618-5644	Amount of Each Disbursement this Period 6.50		
Purpose of Disbursement RATE CHANGE REFUND		Category/Type	Transaction ID : B45765AC03F334183B4E		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. USA PAYROLL			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2019		
Mailing Address 2601 LAC DE VILLE BLVD			FEC Identification Number C		
City ROCHESTER	State NY	Zip Code 14618-5644	Amount of Each Disbursement this Period 1026.71		
Purpose of Disbursement PAYROLL TAXES		Category/Type	Transaction ID : B874733635307480980D		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. USA PAYROLL			Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2019		
Mailing Address 2601 LAC DE VILLE BLVD			FEC Identification Number C		
City ROCHESTER	State NY	Zip Code 14618-5644	Amount of Each Disbursement this Period 1015.27		
Purpose of Disbursement TAXES		Category/Type 001	Transaction ID : BF0FAEBE91B954CFDA17		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional).....▶	2048.48
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 126 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USA PAYROLL		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2019
Mailing Address 2601 LAC DE VILLE BLVD		FEC Identification Number C
City ROCHESTER	State NY	Zip Code 14618-5644
Purpose of Disbursement PAYROLL EXPENSE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 45.15	
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) ▼	Transaction ID : B6A0C1DCDBC174050A6B
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2019
Mailing Address 3048 NYS ROUTE 417		FEC Identification Number C
City OLEAN	State NY	Zip Code 14760-1833
Purpose of Disbursement TELEPHONE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 187.06	
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) ▼	Transaction ID : B4FE7E30290444C7BBEF
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2019
Mailing Address 3048 NYS ROUTE 417		FEC Identification Number C
City OLEAN	State NY	Zip Code 14760-1833
Purpose of Disbursement TELEPHONE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 192.08	
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) ▼	Transaction ID : B376D14CBFE2A46B2898
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	424.29
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 127 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

A. VISA CARDMEMBER SERVICE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 790408

City SAINT LOUIS State MO Zip Code 63179-0408

Purpose of Disbursement SEE BELOW Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify) State: District:

Date of Disbursement: 04 / 04 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 8000.00

Transaction ID : B0BB93C4FD0A74B1B803

Memo Item

B. SHEETZ

Full Name (Last, First, Middle Initial)
Mailing Address 5700 6TH AVE

City ALTOONA State PA Zip Code 16602-1111

Purpose of Disbursement TRAVEL EXPENSE Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify) State: District:

Date of Disbursement: 04 / 04 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 201.44

Transaction ID : B6856D7F6F49A4A9188F

Memo Item

C. GOOGLE.COM

Full Name (Last, First, Middle Initial)
Mailing Address 1600 AMPHITHEATRE PKWY

City MOUNTAIN VIEW State CA Zip Code 94043-1351

Purpose of Disbursement ADVERTISING Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify) State: District:

Date of Disbursement: 04 / 04 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 237.60

Transaction ID : BFE69FFB34B17444CB5B

Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 8000.00

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 128 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LANGHAM HOTEL			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019	
Mailing Address 250 FRANKLIN ST			FEC Identification Number C	
City BOSTON	State MA	Zip Code 02110-2807	Amount of Each Disbursement this Period 240.48	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BBA66BD9915CA4DA0A58	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. SUNOCO			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019	
Mailing Address 139 ELM STREET			FEC Identification Number C	
City PENN YAN	State NY	Zip Code 14527-1411	Amount of Each Disbursement this Period 198.47	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 002	Transaction ID : BD2419E40D51C4359ABE	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. KWIK-FILL			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019	
Mailing Address 8280 STATE ROUTE 54			FEC Identification Number C	
City HAMMONDSPORT	State NY	Zip Code 14840-9558	Amount of Each Disbursement this Period 34.71	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B1A2924D0DC7A4B5BBCB	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	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 129 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019
Mailing Address 300 1ST STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1801
Purpose of Disbursement EVENT CATERING	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 701.17	
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) ▼	Transaction ID : B3B8485B0D66B4DC0B02
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WESTGATE LAS VEGAS		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019
Mailing Address 3000 PARADISE RD		FEC Identification Number C
City LAS VEGAS	State NV	Zip Code 89109-1287
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 959.86	
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) ▼	Transaction ID : B3CD80EA9410F4FE4B86
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019
Mailing Address PO BOX 619612		FEC Identification Number C
City DALLAS	State TX	Zip Code 75261-9612
Purpose of Disbursement AIRFARE	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 2156.00	
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) ▼	Transaction ID : B07B6E94213774280B5D
State: District:	<input checked="" type="checkbox"/> 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 130 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019
Mailing Address 1030 DELTA BOULEVARD		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30354-1989
Purpose of Disbursement TRAVEL EXPENSE	Category/Type 002	
Candidate Name		Amount of Each Disbursement this Period 1966.90
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. LEVELUP		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019
Mailing Address 1 FEDERAL ST 6TH FLOOR		FEC Identification Number C
City BOSTON	State MA	Zip Code 02110-2003
Purpose of Disbursement MEETING EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 272.69
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINEOPENERS.COM INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2019
Mailing Address PO BOX 3482		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement PROMOTIONAL ITEMS	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 397.50
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:	<input checked="" type="checkbox"/> 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 131 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VISA CARDMEMBER SERVICE			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019		
Mailing Address PO BOX 790408			FEC Identification Number C		
City SAINT LOUIS	State MO	Zip Code 63179-0408	Amount of Each Disbursement this Period 8000.00		
Purpose of Disbursement SEE BELOW		Category/ Type 001	Transaction ID : B5577914F308A4A9BB62		
Candidate Name		Memo Item <input type="checkbox"/>			
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. STAPLES			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2019		
Mailing Address 821 COUNTY ROUTE 64			FEC Identification Number C		
City BIG FLATS	State NY	Zip Code 14814	Amount of Each Disbursement this Period 276.54		
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : B7A8E1FD6287247C3A39		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. GOOGLE.COM			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2019		
Mailing Address 1600 AMPHITHEATRE PKWY			FEC Identification Number C		
City MOUNTAIN VIEW	State CA	Zip Code 94043-1351	Amount of Each Disbursement this Period 118.80		
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : B89B71307C4974174BA9		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	8000.00
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 132 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2019
Mailing Address 1030 DELTA BOULEVARD		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30354-1989
Purpose of Disbursement TRAVEL EXPENSE	Category/Type 002	
Candidate Name		Amount of Each Disbursement this Period 1121.00
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CARMINE'S		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2019
Mailing Address 425 7TH STREET NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20004-2229
Purpose of Disbursement EVENT CATERING	Category/Type 003	
Candidate Name		Amount of Each Disbursement this Period 5663.10
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PRICELINE HOTEL ROOMS		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2019
Mailing Address 800 CONNECTICUT AVENUE		FEC Identification Number C
City NORWALK	State CT	Zip Code 06854-1631
Purpose of Disbursement TRAVEL EXPENSE	Category/Type 003	
Candidate Name		Amount of Each Disbursement this Period 141.97
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:	<input checked="" type="checkbox"/> 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 133 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MAILCHIMP			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2019		
Mailing Address 512 MEANS STREET NW			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30318-5798	Amount of Each Disbursement this Period 102.60		
Purpose of Disbursement MAILING		Category/ Type 001	Transaction ID : BF2B9B5CC48A8481796E		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2019		
Mailing Address 3048 NYS ROUTE 417			FEC Identification Number C		
City OLEAN	State NY	Zip Code 14760-1833	Amount of Each Disbursement this Period 547.04		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : BFD63F0FD69A04FC2BDF		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. VISA CARDMEMBER SERVICE			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019		
Mailing Address PO BOX 790408			FEC Identification Number C		
City SAINT LOUIS	State MO	Zip Code 63179-0408	Amount of Each Disbursement this Period 8000.00		
Purpose of Disbursement SEE BELOW		Category/ Type 001	Transaction ID : B1923B087CFA04EB9B68		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	8000.00
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 134 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LANDINI BROTHERS			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019		
Mailing Address 15 KING STREET					
City ALEXANDRIA	State VA	Zip Code 22314-3205	FEC Identification Number C		
Purpose of Disbursement EVENT CATERING		Category/ Type 003	Amount of Each Disbursement this Period 961.79		
Candidate Name		Transaction ID : B906B3CBB1B994263B64			
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) ▼		<input checked="" type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019		
Mailing Address 1030 DELTA BOULEVARD					
City ATLANTA	State GA	Zip Code 30354-1989	FEC Identification Number C		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 002	Amount of Each Disbursement this Period 974.20		
Candidate Name		Transaction ID : B96A6741BF6C647408D4			
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) ▼		<input checked="" type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) C. KB GRAPHICS INC			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019		
Mailing Address 410 W COMMERCIAL ST					
City EAST ROCHESTER	State NY	Zip Code 14445-2202	FEC Identification Number C		
Purpose of Disbursement PRINTING		Category/ Type 001	Amount of Each Disbursement this Period 559.45		
Candidate Name		Transaction ID : B115D4DB58A8C43C3ACC			
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) ▼		<input checked="" type="checkbox"/> Memo Item		
State: _____ District: _____					

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	0.00

**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 135 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LOGO SPORTSWEAR			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019	
Mailing Address 12 BEAUMONT RD			FEC Identification Number C	
City WALLINGFORD	State CT	Zip Code 06492-2402	Amount of Each Disbursement this Period 364.84	
Purpose of Disbursement PROMOTIONAL ITEMS		Category/ Type 001	Transaction ID : B7F76108E9BF24FDCA6E	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. WEGMANS			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019	
Mailing Address 100 WEGMANS MARGET ST			FEC Identification Number C	
City ROCHESTER	State NY	Zip Code 14624	Amount of Each Disbursement this Period 287.28	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : BD39063C010A14C5BBA9	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. LANGHAM HOTEL			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019	
Mailing Address 250 FRANKLIN ST			FEC Identification Number C	
City BOSTON	State MA	Zip Code 02110-2807	Amount of Each Disbursement this Period 469.26	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BB2A87668D83749A4B4B	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	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 136 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EXXONMOBIL			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019	
Mailing Address 2781 LAKEVILLE ROAD			FEC Identification Number C	
City AVON	State NY	Zip Code 14414-9716	Amount of Each Disbursement this Period 188.16	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B01069464C4CC4FAC9A5	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. STREGA WATERFRONT			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019	
Mailing Address 1 MARINA PARK DR			FEC Identification Number C	
City BOSTON	State MA	Zip Code 02210-1832	Amount of Each Disbursement this Period 1829.00	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : BF7271B326F424854866	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. BIG SKY RESORT			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019	
Mailing Address 50 BIG SKY RESORT RD			FEC Identification Number C	
City BIG SKY	State MT	Zip Code 59716	Amount of Each Disbursement this Period 508.25	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BE0D8B77A17E2417BA9B	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	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 137 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2019		
Mailing Address 77 W WACKER DRIVE			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60601-1604	Amount of Each Disbursement this Period 873.00		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 003	Transaction ID : B6F54F1EF72444CB2978		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
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. VISA CARDMEMBER SERVICE			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2019		
Mailing Address PO BOX 790408			FEC Identification Number C		
City SAINT LOUIS	State MO	Zip Code 63179-0408	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement SEE BELOW		Category/ Type 001	Transaction ID : BE8E391EFE99441A5854		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2019		
Mailing Address 300 1ST STREET SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 903.23		
Purpose of Disbursement EVENT CATERING		Category/ Type 003	Transaction ID : B3BEFAAFED72643EFA6E		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
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 138 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MAILCHIMP			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2019		
Mailing Address 512 MEANS STREET NW			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30318-5798	Amount of Each Disbursement this Period 102.60		
Purpose of Disbursement MAILING		Category/ Type 001	Transaction ID : B112F94D9BD47440F8BF		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. ARISTOTLE INTERNATIONAL INC.			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2019		
Mailing Address 205 PENNSYLVANIA AVENUE SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-1164	Amount of Each Disbursement this Period 3450.00		
Purpose of Disbursement DATABASE		Category/ Type 001	Transaction ID : B47E861B81FB34515BA7		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. VISA CARDMEMBER SERVICE			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2019		
Mailing Address PO BOX 790408			FEC Identification Number C		
City SAINT LOUIS	State MO	Zip Code 63179-0408	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement SEE BELOW		Category/ Type 001	Transaction ID : B19B7FDD911EC4B76865		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
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 139 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VISA CARDMEMBER SERVICE			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2019		
Mailing Address PO BOX 790408			FEC Identification Number C		
City SAINT LOUIS	State MO	Zip Code 63179-0408	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement SEE BELOW		Category/ Type 001	Transaction ID : B7291DD4EEA8C4718B6D		
Candidate Name		Memo Item <input type="checkbox"/>			
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. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2019		
Mailing Address PO BOX 619612			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75261-9612	Amount of Each Disbursement this Period 1594.54		
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : BBF510626880444CDA2A		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. STAYBRIDGE SUITES			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2019		
Mailing Address 201 TOWNLEY AVENUE			FEC Identification Number C		
City CORNING	State NY	Zip Code 14830-2000	Amount of Each Disbursement this Period 1794.93		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 002	Transaction ID : BF3CD005832B546A9AF9		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
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 140 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AVIS		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2019
Mailing Address 6 SYLVAN WAY		FEC Identification Number C
City PARSIPPANY	State NJ	Zip Code 07054
Purpose of Disbursement CAR RENTAL	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 323.96	
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) ▼	Transaction ID : B77DF0C98C8A44DA4895
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. GOOGLE.COM		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2019
Mailing Address 1600 AMPHITHEATRE PKWY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043-1351
Purpose of Disbursement ADVERTISING	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 118.60	
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) ▼	Transaction ID : B1B3EA4936E86473C806
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FAIRFIELD INN		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2019
Mailing Address 35 BUFFALO ST		FEC Identification Number C
City CORNING	State NY	Zip Code 14830-1325
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 153.00	
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) ▼	Transaction ID : BF5BBC942E28742458F8
State: District:	<input checked="" type="checkbox"/> 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 141 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITAL GRILLE			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2019		
Mailing Address 601 PENNSYLVANIA AVENUE NW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20004-2601	Amount of Each Disbursement this Period 783.80		
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : BC42AF934CC2C427199B		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2019		
Mailing Address 300 1ST STREET SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 224.68		
Purpose of Disbursement EVENT CATERING		Category/ Type 003	Transaction ID : B25E6F09A66B74D3DA92		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. VISA CARDMEMBER SERVICE			Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2019		
Mailing Address PO BOX 790408			FEC Identification Number C		
City SAINT LOUIS	State MO	Zip Code 63179-0408	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement SEE BELOW		Category/ Type 001	Transaction ID : B753D803163FD4C6E9EC		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
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 142 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CORNER BAKERY		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2019
Mailing Address 1425 K STREET NW FRONT 1		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20005-3546
Purpose of Disbursement EVENT CATERING	Category/Type 003	
Candidate Name		Amount of Each Disbursement this Period 478.60
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:	Transaction ID : B839C7EF50DD2468C9E5 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. GALLATIN RIVER GUIDES		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2019
Mailing Address 47309 GALLATIN RD		FEC Identification Number C
City BIG SKY	State MT	Zip Code 59716
Purpose of Disbursement EVENT TICKETS	Category/Type 003	
Candidate Name		Amount of Each Disbursement this Period 845.05
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:	Transaction ID : B575D16170FF14D7D903 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BIG SKY RESORT		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2019
Mailing Address 50 BIG SKY RESORT RD		FEC Identification Number C
City BIG SKY	State MT	Zip Code 59716
Purpose of Disbursement TRAVEL EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 451.13
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:	Transaction ID : BDF8E6B32E3CE4BD6BDF <input checked="" type="checkbox"/> 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 143 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STAYBRIDGE SUITES			Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2019	
Mailing Address 201 TOWNLEY AVENUE			FEC Identification Number C	
City CORNING	State NY	Zip Code 14830-2000	Amount of Each Disbursement this Period 263.86	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 002	Transaction ID : B5CB9FFBE3DC6409D86E	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. CANYON ADVENTURES			Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2019	
Mailing Address 47200 GALLATIN RD			FEC Identification Number C	
City GALLATIN GATEWAY	State MT	Zip Code 59730-8633	Amount of Each Disbursement this Period 1674.20	
Purpose of Disbursement EVENT TRAVEL		Category/ Type 001	Transaction ID : B ABD2955B51A74E69A84	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. LONE MOUNTAIN SPORTS			Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2019	
Mailing Address 39 BLACK EAGLE RD			FEC Identification Number C	
City BIG SKY	State MT	Zip Code 59716-7749	Amount of Each Disbursement this Period 864.17	
Purpose of Disbursement EVENT EXPENSE		Category/ Type 001	Transaction ID : B34C1307778324E7E969	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	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 144 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WASHINGTON TAX & PUBLIC POLICY GROUP		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2019
Mailing Address 300 NEW JERSEY AVE NW SUITE 601		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001-2080
Purpose of Disbursement EVENT FACILITY RENTAL	Category/Type 003	
Candidate Name	Amount of Each Disbursement this Period 250.00	
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:	Transaction ID : B5FB66D711DDE4707805 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WAYNE, ANDREW, , ,		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2019
Mailing Address 1191 N VERMONT ST		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22201-4762
Purpose of Disbursement SALARY	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 228.37	
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:	Transaction ID : B8633CA6944CC4E7898D <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WAYNE, ANDREW, , ,		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2019
Mailing Address 1191 N VERMONT ST		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22201-4762
Purpose of Disbursement SALARY	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 228.37	
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:	Transaction ID : B81F7D88ADE094F30BB7 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	706.74
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WAYNE, ANDREW, , ,			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2019		
Mailing Address 1191 N VERMONT ST					
City ARLINGTON	State VA	Zip Code 22201-4762	FEC Identification Number C		
Purpose of Disbursement SALARY		Category/ Type 001	Amount of Each Disbursement this Period 228.37		
Candidate Name		Transaction ID : B0B8FABDFF45C41E892C			
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) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) B. WAYNE, ANDREW, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2019		
Mailing Address 1191 N VERMONT ST					
City ARLINGTON	State VA	Zip Code 22201-4762	FEC Identification Number C		
Purpose of Disbursement SALARY		Category/ Type 001	Amount of Each Disbursement this Period 228.37		
Candidate Name		Transaction ID : B1FA5F041CEC74537B9D			
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) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) C. WAYNE, ANDREW, , ,			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2019		
Mailing Address 1191 N VERMONT ST					
City ARLINGTON	State VA	Zip Code 22201-4762	FEC Identification Number C		
Purpose of Disbursement SALARY		Category/ Type 001	Amount of Each Disbursement this Period 228.37		
Candidate Name		Transaction ID : B0FD2E100FEC74C86A27			
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) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

SUBTOTAL of Disbursements This Page (optional).....▶	685.11
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 146 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WAYNE, ANDREW, , ,			Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2019		
Mailing Address 1191 N VERMONT ST			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22201-4762	Amount of Each Disbursement this Period 228.43		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : B15D26A175BD7467292C		
Candidate Name		Memo Item <input type="checkbox"/>			
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.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	228.43
TOTAL This Period (last page this line number only).....▶	293646.99

**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 147 OF 150	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KELLY REED VICTORY COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2019	
Mailing Address 228 S WASHINGTON ST STE 115			FEC Identification Number C 00682062	
City ALEXANDRIA	State VA	Zip Code 22314-5404	Amount of Each Disbursement this Period 4797.00	
Purpose of Disbursement TRANSFER: TRANSFER TO AFFILIATED		Category/ Type 008	Transaction ID : BD0F81E68D65447F68D8	
Candidate Name KELLY REED VICTORY COMMITTEE		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....▶	4797.00
TOTAL This Period (last page this line number only).....▶	4797.00

**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 148 OF 150			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WD MANAGEMENT, LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2019		
Mailing Address 375 ESSJAY STE 200					
City BUFFALO	State NY	Zip Code 14221-5789	FEC Identification Number C		
Purpose of Disbursement REFUND: REFUND		Category/ Type 010	Amount of Each Disbursement this Period 250.00		
Candidate Name		Transaction ID : BBAF4E54767894E09AB1			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	250.00

**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 149 OF 150	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF MICHAEL PRINTUP			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2019	
Mailing Address 212 CHATHAM CT			FEC Identification Number C	
City HORSEHEADS	State NY	Zip Code 14845-1382	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement REFUND: REFUND		Category/ Type 010	Transaction ID : B8608B4C91657457EB8B	
Candidate Name FRIENDS OF MICHAEL PRINTUP		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	250.00

**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 150 OF 150			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM REED FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF JOHN BUCKLEY			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2019		
Mailing Address 9 W VANSCOTER ST			FEC Identification Number C		
City HORNELL	State NY	Zip Code 14843-2119	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement CONTRIBUTION STATE/LOCAL		Category/ Type 012	Transaction ID : BB5E11934592848A4B25		
Candidate Name FRIENDS OF JOHN BUCKLEY		Memo Item <input type="checkbox"/>			
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. NY REPUBLICAN ASSEMBLY CAMP COMM			Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2019		
Mailing Address 224 PEARL ST			FEC Identification Number C		
City CORNING	State NY	Zip Code 14830-3217	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement CONTRIBUTION - STATE/LOCAL		Category/ Type 012	Transaction ID : B5593D4D4F0644D17BD0		
Candidate Name NY REPUBLICAN ASSEMBLY CAMP COMM		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....▶	5250.00
TOTAL This Period (last page this line number only).....▶	5250.00