



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Derrick 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))....	63051.02	203703.89
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	63051.02	203703.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	33513.02	65919.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	580.23	834.17
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	32932.79	65085.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	138618.10	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Derrick for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2015 To: M M / D D / Y Y Y Y 12 / 31 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	33560.00	149906.38
(ii) Unitemized .....	9891.02	27137.51
(iii) TOTAL of contributions from individuals .....	43451.02	177043.89
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	19600.00	26660.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	63051.02	203703.89
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	580.23	834.17
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	63631.25	204538.06

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	33513.02	65919.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	33513.02	65919.96

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	108499.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	63631.25
25. SUBTOTAL (add Line 23 and Line 24).....	172131.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	33513.02
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	138618.10

**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 58  
(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)  
**Derrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tasha Williams**

Mailing Address 143 Maxwell Ave

City State Zip Code  
Geneva NY 14456

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 05 2015

**Transaction ID : 11ai-000000499**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 26 Prescott Ave

City State Zip Code  
Bronxville NY 10708

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

Name of Employer Occupation  
Ripplewood Holdings Founder and CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 05 2015

**Transaction ID : 11ai-000000490**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 1074 Cherokee Rd

City State Zip Code  
Louisville KY 40204

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 05 2015

**Transaction ID : 11ai-000000497**

Amount of Each Receipt this Period  
250.00

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

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

3050.00

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

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

FOR LINE NUMBER: PAGE 6 OF 58  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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

**A.** Full Name (Last, First, Middle Initial)  
**James M. Swingle**

Mailing Address 11409 Old Creedmoor Rd

City Raleigh State NC Zip Code 27613

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

Name of Employer Self Occupation Aerospace Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : 11ai-000000500**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address PO Box 60

City Cold Spring State NY Zip Code 10516-0060

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

Name of Employer Paul Weiss Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : 11ai-000000527**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 64 Wolverine Pt

City Massena State NY Zip Code 13662-3174

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

Name of Employer Curran Renewable Energy Occupation President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 16 / 2015

**Transaction ID : 11ai-000000529**

Amount of Each Receipt this Period  
 2000.00

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

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

3250.00

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

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

FOR LINE NUMBER: PAGE 7 OF 58  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Earl Pomeroy**

Mailing Address **PO Box 4141**

City **Bismarck** State **ND** Zip Code **58502**

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

Name of Employer **Alston Bird** Occupation **Attorney**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 16 / 2015**

**Transaction ID : 11ai-00000530**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **1804 Williams Ave**

City **Natchitoches** State **LA** Zip Code **71457-5321**

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

Name of Employer **N/A** Occupation **Not Employed**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 18 / 2015**

**Transaction ID : 11ai-00000534**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **12 Scott Way**

City **Plattsburgh** State **NY** Zip Code **12903**

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

Name of Employer **Retired** Occupation **N/A**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

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

**Transaction ID : 11ai-00000538**

Amount of Each Receipt this Period  
**300.00**

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

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

**1300.00**

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 58  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Lloyd R. Lawrence Jr.**

Mailing Address 667 S Washington St

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : 11ai-000000540**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 26 Nelson Ave Ext.

City State Zip Code  
Saratoga Springs NY 12866-8763

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

Name of Employer Occupation  
Skidmore Administrator

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : 11ai-000000544**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Lewis County Democratic Committee**

Mailing Address 5510 Jackson St

City State Zip Code  
Lowville NY 13367

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : 11ai-000000546**

Amount of Each Receipt this Period  
250.00

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

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

750.00



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

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

Mailing Address 64 Simpson Dr

City Walnut Creek State CA Zip Code 94596

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

Name of Employer Wells Capital Management Occupation Fixed Income Trader

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-00000553**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 5900 19th St N

City Arlington State VA Zip Code 22205

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2015

**Transaction ID : 11ai-00000555**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 225B Barnard Loop

City West Point State NY Zip Code 10996

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

Name of Employer WPAOG Occupation Development

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2015

**Transaction ID : 11ai-00000584**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 165 Fir Way  
Unit 21

City Lake Placid State NY Zip Code 12946

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

Name of Employer Retired Occupation Information Company Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-00000585**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 9 Lynde St

City Plattsburgh State NY Zip Code 12901

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

Name of Employer SUNY Plattsburgh Occupation Professor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-00000589**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 410 Boyd St

City Boonton State NJ Zip Code 07005

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

Name of Employer Self Occupation Horticulturist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 26 / 2015

**Transaction ID : 11ai-00000594**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 57 Court St

City State Zip Code  
Plattsburgh NY 12901

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

Name of Employer Self Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 27 / 2015

**Transaction ID : 11ai-00000620**

Amount of Each Receipt this Period  
500.00

Earmarked through ActBlue Conduit Committee 11-29-2015 \$1,103.00-See memo on Sch A for line 11c

**B.** Full Name (Last, First, Middle Initial)  
**James A. Goodwin Jr.**

Mailing Address 26 Barkeater Way

City State Zip Code  
Keene NY 12942-2506

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

Name of Employer ADK Trail Improvement Soc. Occupation Executive Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 28 / 2015

**Transaction ID : 11ai-00000626**

Amount of Each Receipt this Period  
150.00

Earmarked through ActBlue Conduit Committee 11-29-2015 \$1,103.00-See memo on Sch A for line 11c

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

Mailing Address 741 Military Turnpike

City State Zip Code  
Plattsburgh NY 12901-5714

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 28 / 2015

**Transaction ID : 11ai-00000627**

Amount of Each Receipt this Period  
50.00

Earmarked through ActBlue Conduit Committee 11-29-2015 \$1,103.00-See memo on Sch A for line 11c

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

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

700.00

**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 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 85 Crabapple Dr

City Shelburne State VT Zip Code 05482

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 29 / 2015

**Transaction ID : 11ai-00000629**

Amount of Each Receipt this Period  
 50.00

Earmarked through ActBlue Conduit Committee 11-29-2015 \$1,103.00-See memo on Sch A for line 11c

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

Mailing Address 71 E 77th St  
Apt 4D

City New York State NY Zip Code 10075

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

Name of Employer Davis Wright Tremaine LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 29 / 2015

**Transaction ID : 11ai-00000595**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address PO Box 42

City New Russia State NY Zip Code 12964-0042

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **215.00**

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

**Transaction ID : 11ai-00000691**

Amount of Each Receipt this Period  
 50.00

Earmarked through ActBlue Conduit Committee 12-06-2015 \$963.00-See memo on Sch A for line 11c

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

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

**350.00**

**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 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 6445 Paul Rudy Rd

City Middletown State MD Zip Code 21769

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

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

**Transaction ID : 11ai-00000692**

Amount of Each Receipt this Period  
**50.00**

Earmarked through ActBlue Conduit Committee 12-06-2015 \$963.00-See memo on Sch A for line 11c

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

Mailing Address PO Box 103

City Prospect Harbor State ME Zip Code 04669-0103

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1050.00**

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

**Transaction ID : 11ai-00000570**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Carol Blakeslee-Collin**

Mailing Address 1760 Main St

City Keeseville State NY Zip Code 12944

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **254.00**

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

**Transaction ID : 11ai-00000695**

Amount of Each Receipt this Period  
**54.00**

Earmarked through ActBlue Conduit Committee 12-06-2015 \$963.00-See memo on Sch A for line 11c

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

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

**154.00**

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

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

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Marlene R. McAlevy**

Mailing Address 88 Whitetail Dr PO Box 309

City Jay State NY Zip Code 12941

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

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

**Transaction ID : 11ai-000000564**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 72 Schaefer Rd

City Keene State NY Zip Code 12942

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600.00**

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

**Transaction ID : 11ai-000000568**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 3424 Robinhood

City Houston State TX Zip Code 77005

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

**Transaction ID : 11ai-000000562**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1150.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Ara Asadourian**

Mailing Address 112 Beekman St

City State Zip Code  
Plattsburgh NY 12901-1423

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : 11ai-000000567**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 14220 Teasdale Ave

City State Zip Code  
Hudson FL 34667

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : 11ai-000000571**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 33 E 70th St

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Patterson Belknap Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : 11ai-000000575**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Deborah A. DeCotis**

Mailing Address 160 E 72nd St

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Kanders Acquisition Company, Inc. Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : 11ai-00000576**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 75 Federal St Flr 18

City State Zip Code  
Boston MA 02110-1913

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

Name of Employer Occupation  
Saratoga Harness Racing President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : 11ai-00000577**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO Box 13

City State Zip Code  
Wilmington NY 12997-0013

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

Name of Employer Occupation  
Retired N/A

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

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

**Transaction ID : 11ai-00000615**

Amount of Each Receipt this Period  
100.00

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

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

2100.00



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

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

FOR LINE NUMBER: PAGE 17 OF 58  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Roberta Heyne**

Mailing Address 72 Schaefer Rd

City Keene State NY Zip Code 12942

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-000000613**

Amount of Each Receipt this Period  
 100.00

Amount of Each Receipt this Period  
 700.00

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

Mailing Address 90 Riverside Dr  
 Apartment 4A

City New York State NY Zip Code 10024

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

Name of Employer Paul, Weiss, Rifkind et al Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-000000646**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 33 E 70th St

City New York State NY Zip Code 10021

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

Name of Employer Patterson Belknap Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-000000637**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1250.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Charles P. Updike**

Mailing Address 168 Paine Ave

City State Zip Code  
New Rochelle NY 10804

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

Name of Employer Occupation  
Schoeman Updike Kaufman & Stern LLP Senior Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : 11ai-00000636**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Elizabeth G. Van Anden**

Mailing Address 147 Glenwood Dr

City State Zip Code  
Saranac Lake NY 12983

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

Name of Employer Occupation  
Adirondack Internal Medicine & Pediatr Physician Assistant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : 11ai-00000639**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 435 E 52nd St 14G

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : 11ai-00000647**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Douglas R. Skopp**

Mailing Address 741 Military Turnpike

City State Zip Code  
Plattsburgh NY 12901-5714

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

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

**Transaction ID : 11ai-00000662**

Amount of Each Receipt this Period  
50.00

Earmarked through ActBlue Conduit Committee 12-20-2015 \$1,100.00-See memo on Sch A for line 11c

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

Mailing Address 326 Downs Rd

City State Zip Code  
Cadyville NY 12918

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

Name of Employer Occupation  
NYS Correction Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : 11ai-00000670**

Amount of Each Receipt this Period  
250.00

Earmarked through ActBlue Conduit Committee 12-20-2015 \$1,100.00-See memo on Sch A for line 11c

**C.** Full Name (Last, First, Middle Initial)  
**Elizabeth G. Van Anden**

Mailing Address 147 Glenwood Dr

City State Zip Code  
Saranac Lake NY 12983

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

Name of Employer Occupation  
Adirondack Internal Medicine & Pediatr Physician Assistant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 19 2015

**Transaction ID : 11ai-00000675**

Amount of Each Receipt this Period  
100.00

Earmarked through ActBlue Conduit Committee 12-20-2015 \$1,100.00-See memo on Sch A for line 11c

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Al Hanna**

Mailing Address 7120 Delmonico Dr

City State Zip Code  
Colorado Springs CO 80919

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

Name of Employer Occupation  
Hanna & Associates Recruiter

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 24 / 2015

**Transaction ID : 11ai-00000679**

Amount of Each Receipt this Period  
25.00

Earmarked through ActBlue Conduit Committee 12-27-2015 \$25.00-See memo on Sch A for line 11c

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

Mailing Address PO Box 1199  
62 Moir Road

City State Zip Code  
Saranac Lake NY 12983

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

Name of Employer Occupation  
Vanguard Atlantic Ltd. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
-2700.00

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

**Transaction ID : 11ai-00000706**

Amount of Each Receipt this Period  
-2700.00

**[MEMO ITEM]**  
Redesignated to General

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

Mailing Address PO Box 1199  
62 Moir Road

City State Zip Code  
Saranac Lake NY 12983

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

Name of Employer Occupation  
Vanguard Atlantic Ltd. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

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

**Transaction ID : 11ai-00000707**

Amount of Each Receipt this Period  
2700.00

**[MEMO ITEM]**  
Redesignated from Primary

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

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

25.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Ernest Keet**

Mailing Address PO Box 1199  
62 Moir Road

City Saranac Lake State NY Zip Code 12983

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

Name of Employer Vanguard Atlantic Ltd. Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-00000703**

Amount of Each Receipt this Period  
 5400.00

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

Mailing Address PO Box 1199  
62 Moir Road

City Saranac Lake State NY Zip Code 12983

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

Name of Employer Vanguard Atlantic Ltd. Occupation Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-00000708**

Amount of Each Receipt this Period  
 -2700.00

**[MEMO ITEM]**  
Redesignated to General

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

Mailing Address PO Box 1199  
62 Moir Road

City Saranac Lake State NY Zip Code 12983

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

Name of Employer Vanguard Atlantic Ltd. Occupation Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-00000709**

Amount of Each Receipt this Period  
 2700.00

**[MEMO ITEM]**  
Redesignated from Primary

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Nancy Keet**

Mailing Address PO Box 1199  
62 Moir Road

City Saranac Lake State NY Zip Code 12983

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

Name of Employer Vanguard Atlantic Ltd. Occupation Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-00000704**

Amount of Each Receipt this Period  
 5400.00

**B.** Full Name (Last, First, Middle Initial)  
**Sue Sue Abbott-Jones**

Mailing Address 254 Trudeau Rd Apt.1 PO Box 166

City Saranac Lake State NY Zip Code 12983

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-00000735**

Amount of Each Receipt this Period  
 50.00

Earmarked through ActBlue Conduit Committee 12-31-2015 \$1098.02-See memo on Sch A for line 11c

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

Mailing Address 111 Broadway Rm 1000

City New York State NY Zip Code 10006

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

Name of Employer Self Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11ai-00000654**

Amount of Each Receipt this Period  
 1000.00

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

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

6450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address 989 Memorial Dr

City State Zip Code  
Cambridge MA 02138

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : 11ai-00000656**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2310 N Edgemont St

City State Zip Code  
Los Angeles CA 90027-1053

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

Name of Employer Occupation  
Self TV Production

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : 11ai-00000657**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 957 Riverview Rd

City State Zip Code  
Rexford NY 12148

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

Name of Employer Occupation  
SUNY Teacher

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
215.00

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

**Transaction ID : 11ai-00000751**

Amount of Each Receipt this Period  
15.00

Earmarked through ActBlue Conduit Committee 12-31-2015 \$1098.02-See memo on Sch A for line 11c

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

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

515.00

**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 24 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Sharon Updike**

Mailing Address 613 Yorktown

City State Zip Code  
Chapel Hill NC 27516

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

Name of Employer Occupation  
Duke University School of Medicine Education

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
366.00

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

**Transaction ID : 11ai-00000748**

Amount of Each Receipt this Period  
116.00

Earmarked through ActBlue Conduit Committee 12-31-2015 \$1098.02-See memo on Sch A for line 11c

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

116.00

33560.00



**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 58
	<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)  
**Derrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Friends of Kimberly Davis**

Mailing Address **PO Box 1903**

City **Plattsburgh** State **NY** Zip Code **12901**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2015**

**Transaction ID : 11c-000000496**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Permissible Funds

**B.** Full Name (Last, First, Middle Initial)  
**United Association Political Education Committee**

Mailing Address **Three Park Place**

City **Annapolis** State **MD** Zip Code **21401**

FEC ID number of contributing federal political committee. **C C00012476**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 13 / 2015**

**Transaction ID : 11c-000000525**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000.00

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

Mailing Address **700 13th St NW Ste 600**

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

FEC ID number of contributing federal political committee. **C C00140715**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

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

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

**Transaction ID : 11c-000000535**

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

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

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

\_\_\_\_\_ 7100.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 58
	<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)  
**Derrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ameripac: The Fund for a Greater America**

Mailing Address 700 13th St NW Ste 600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00271338**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11c-000000536**

Amount of Each Receipt this Period  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**Int'l Union of Bricklayers and Allied Craftworkers PAC**

Mailing Address 620 F St NW Ste 900

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00003632**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : 11c-000000537**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2015

**Transaction ID : 11c-000000581**

Amount of Each Receipt this Period  
 10.00

**[MEMO ITEM]**  
 Total Earmarked through Conduit Committee; PAC Limits not affected.

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 58
<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)  
**Derrick for Congress**

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1360.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		22		2015

**Transaction ID : 11c-00000582**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
Total Earmarked through Conduit Committee; PAC Limits not affected.

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2463.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		29		2015

**Transaction ID : 11c-00000630**

Amount of Each Receipt this Period  
1103.00

**[MEMO ITEM]**  
Total Earmarked through Conduit Committee; PAC Limits not affected.

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3426.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		06		2015

**Transaction ID : 11c-00000702**

Amount of Each Receipt this Period  
963.00

**[MEMO ITEM]**  
Total Earmarked through Conduit Committee; PAC Limits not affected.

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 58
	<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)  
**Derrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Harrison C Freer Campaign Fund**

Mailing Address 28 Garrison Rd

City State Zip Code  
Queensbury NY 12804

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

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

**Transaction ID : 11c-000000614**

Amount of Each Receipt this Period  
200.00

See refund of contributon on Q1 2016 FEC Report

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

Mailing Address PO Box 441146

City State Zip Code  
Somerville MA 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4526.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2015

**Transaction ID : 11c-000000677**

Amount of Each Receipt this Period  
1100.00

**[MEMO ITEM]**  
Total Earmarked through Conduit Committee; PAC Limits not affected.

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

Mailing Address PO Box 441146

City State Zip Code  
Somerville MA 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4551.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 27 / 2015

**Transaction ID : 11c-000000680**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
Total Earmarked through Conduit Committee; PAC Limits not effected.

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 58
	<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)  
**Derrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VOTEVETS, Inc.**

Mailing Address **PO Box 75357**

City **Washington** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C C00418897**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

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

**Transaction ID : 11c-000000650**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**New York Jobs PAC**

Mailing Address **PO Box 708**

City **Melville** State **NY** Zip Code **11747**

FEC ID number of contributing federal political committee. **C C00413716**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

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

**Transaction ID : 11c-000000648**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**International Brotherhood of Electrical Workers Political Action Committee**

Mailing Address **900 Seventh St NW**

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

FEC ID number of contributing federal political committee. **C C00027342**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1300.00**

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

**Transaction ID : 11c-000000649**

Amount of Each Receipt this Period  
**1300.00**

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

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

**4800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 58
	<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)  
**Derrick for Congress**

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

Mailing Address **PO Box 441146**

City **Somerville** State **MA** Zip Code **02144**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **5649.02**

Date of Receipt  
 /  /   
**12 / 31 / 2015**

**Transaction ID : 11c-00000727**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1098.02**

**[MEMO ITEM]**  
 Total Earmarked through Conduit Committee; PAC Limits not effected.

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

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

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

Date of Receipt  
 /  /

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

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

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

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

Date of Receipt  
 /  /

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

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

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

\_\_\_\_\_ **0.00**

\_\_\_\_\_ **19600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Westchester Marriott**

Mailing Address 670 White Plains Rd

City Tarrytown State NY Zip Code 10591

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
830.23

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2015

**Transaction ID : 14-01-00125-00145**

Amount of Each Receipt this Period  
580.23

Committee Share of Event Space

Originally Paid to Westchester Marriott 09/23/2015

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

580.23

580.23

# 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 32 OF 58	
	<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)  
**Derrick for Congress**

**A. ADP Payroll Service**

Full Name (Last, First, Middle Initial)  
Mailing Address 504 Clinton Center Dr STE 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll - See Memo's

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
1387.13

Transaction ID : 17-01-00091-0000

Category/Type

**B. Whitney Buck Bobbin**

Full Name (Last, First, Middle Initial)  
Mailing Address 13 Deland Way

City Plattsburgh State NY Zip Code 12901-4309

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
1387.13

Transaction ID : 17-01-00091-00102

[MEMO ITEM]

Category/Type

**c. ADP Payroll Service**

Full Name (Last, First, Middle Initial)  
Mailing Address 504 Clinton Center Dr STE 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement  
Payroll Taxes - See Memo's

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
495.45

Transaction ID : 17-01-00092-0000

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 1882.58

**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 33 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Department of Taxation</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2015</b>
Mailing Address <b>PO Box 15119</b>		Amount of Each Disbursement this Period <b>73.78</b>
City <b>Albany</b> State <b>NY</b> Zip Code <b>12212-5119</b>	Purpose of Disbursement <b>Payroll Taxes</b>	
Candidate Name		Category/Type
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)	<b>Transaction ID : 17-01-00092-00103</b> <b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2015</b>
Mailing Address <b>Tax Return Division PO Box 409101</b>		Amount of Each Disbursement this Period <b>421.67</b>
City <b>Ogden</b> State <b>UT</b> Zip Code <b>84409</b>	Purpose of Disbursement <b>Payroll Taxes</b>	
Candidate Name		Category/Type
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)	<b>Transaction ID : 17-01-00092-00104</b> <b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2015</b>
Mailing Address <b>504 Clinton Center Dr STE 4400</b>		Amount of Each Disbursement this Period <b>19.93</b>
City <b>Clinton</b> State <b>MS</b> Zip Code <b>39056-5610</b>	Purpose of Disbursement <b>Workers Comp Insurance</b>	
Candidate Name		Category/Type
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)	<b>Transaction ID : 17-01-00093-00105</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>19.93</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 6.56
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll Taxes - See Memo's	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00133-0000</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Department of Taxation</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address PO Box 15119		Amount of Each Disbursement this Period 6.56
City Albany State NY Zip Code 12212-5119	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00133-00161</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Westchester Marriott</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 670 White Plains Rd		Amount of Each Disbursement this Period 580.07
City Tarrytown State NY Zip Code 10591	Purpose of Disbursement Room Rental & Catering	
Candidate Name	Category/Type	<b>Transaction ID : 17-03-00025-00025</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	586.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 58			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chase Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address PO Box 94014		Amount of Each Disbursement this Period 2550.00
City Palatine	State IL	
Zip Code 60094	Purpose of Disbursement Credit Card Payment - See Memo	<b>Transaction ID : 17-01-00105-0000</b>
Candidate Name	Category/ Type	
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>B. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 1101 15th St NW STE 500		Amount of Each Disbursement this Period 2550.00
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Database Subscription	<b>Transaction ID : 17-01-00105-00121</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>c. CommonCentsConsulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 2910 E Gary Way		Amount of Each Disbursement this Period 2000.00
City Phoenix	State AZ	
Zip Code 85042	Purpose of Disbursement Compliance & Accounting Services	<b>Transaction ID : 17-01-00106-00122</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 58	
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. CommonCentsConsulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 05 / 2015</b>
Mailing Address <b>2910 E Gary Way</b>		Amount of Each Disbursement this Period <b>2000.00</b>
City <b>Phoenix</b> State <b>AZ</b> Zip Code <b>85042</b>	Category/Type	
Purpose of Disbursement <b>Compliance &amp; Accounting Services</b>		<b>Transaction ID : 17-01-00106-00123</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sandler, Reiff, Lamb, Rosenstein &amp; Birkenstock, PC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 05 / 2015</b>
Mailing Address <b>1025 Vermont Ace NW</b>		Amount of Each Disbursement this Period <b>3000.00</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20005</b>	Category/Type	
Purpose of Disbursement <b>Legal Fees</b>		<b>Transaction ID : 17-01-00108-00125</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Democracy Engine, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 07 / 2015</b>
Mailing Address <b>850 Quincy St NW #402</b>		Amount of Each Disbursement this Period <b>27.09</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20011</b>	Category/Type	
Purpose of Disbursement <b>Merchant Fees</b>		<b>Transaction ID : 17-01-00120-00139</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5027.09</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 80.56
City Clinton	State MS	
Zip Code 39056-5610	Purpose of Disbursement Payroll Fee	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 1787.28
City Clinton	State MS	
Zip Code 39056-5610	Purpose of Disbursement Payroll - See Memo's	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Whitney Buck Bobbin</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 13 Deland Way		Amount of Each Disbursement this Period 1387.14
City Plattsburgh	State NY	
Zip Code 12901-4309	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1867.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Margaret Lefevre</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 2195 Route 3		Amount of Each Disbursement this Period 400.14
City Cadyville	State NY	
Zip Code 12918	Purpose of Disbursement Payroll	Transaction ID : 17-01-00117-00138
Candidate Name	Category/ Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 638.68
City Clinton	State MS	
Zip Code 39056-5610	Purpose of Disbursement Payroll Taxes - See Memo's	Transaction ID : 17-01-00118-0000
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Department of Taxation</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address PO Box 15119		Amount of Each Disbursement this Period 100.80
City Albany	State NY	
Zip Code 12212-5119	Purpose of Disbursement Payroll Taxes	Transaction ID : 17-01-00118-00135
Candidate Name	Category/ Type	
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)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	638.68
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 58	
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2015</b>
Mailing Address Tax Return Division PO Box 409101		Amount of Each Disbursement this Period <b>537.88</b>
City Ogden	State UT	Zip Code 84409
Purpose of Disbursement Payroll Taxes	Category/ Type	
Candidate Name	Transaction ID : <b>17-01-00118-00136</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2015</b>
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period <b>22.98</b>
City Clinton	State MS	Zip Code 39056-5610
Purpose of Disbursement Workers Comp Insurance	Category/ Type	
Candidate Name	Transaction ID : <b>17-01-00119-00137</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2015</b>
Mailing Address 742 Bear Swamp Rd		Amount of Each Disbursement this Period <b>122.50</b>
City Peru	State NY	Zip Code 12972
Purpose of Disbursement Postage	Category/ Type	
Candidate Name	Transaction ID : <b>17-03-00023-00023</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>145.48</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Democracy Engine, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 21 / 2015</b>	
Mailing Address <b>850 Quincy St NW #402</b>			Amount of Each Disbursement this Period <b>20.08</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20011</b>	Transaction ID : <b>17-01-00127-00147</b>	
Purpose of Disbursement <b>Merchant Fees</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ADP Payroll Service</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 23 / 2015</b>	
Mailing Address <b>504 Clinton Center Dr STE 4400</b>			Amount of Each Disbursement this Period <b>80.56</b>	
City <b>Clinton</b>	State <b>MS</b>	Zip Code <b>39056-5610</b>	Transaction ID : <b>17-01-00138-00166</b>	
Purpose of Disbursement <b>Payroll Fee</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Democracy Engine, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 28 / 2015</b>	
Mailing Address <b>850 Quincy St NW #402</b>			Amount of Each Disbursement this Period <b>9.97</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20011</b>	Transaction ID : <b>17-01-00135-00163</b>	
Purpose of Disbursement <b>Merchant Fees</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>110.61</b>
<b>TOTAL</b> This Period (last page this line number only).....	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 58	
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2015</b>
Mailing Address <b>504 Clinton Center Dr STE 4400</b>		Amount of Each Disbursement this Period <b>1890.11</b>
City <b>Clinton</b> State <b>MS</b> Zip Code <b>39056-5610</b>	Purpose of Disbursement <b>Payroll - See Memo's</b>	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00129-0000</b>
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>B. Whitney Buck Bobbin</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2015</b>
Mailing Address <b>13 Deland Way</b>		Amount of Each Disbursement this Period <b>1387.13</b>
City <b>Plattsburgh</b> State <b>NY</b> Zip Code <b>12901-4309</b>	Purpose of Disbursement <b>Payroll</b>	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00129-00149</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Margaret Lefevre</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2015</b>
Mailing Address <b>2195 Route 3</b>		Amount of Each Disbursement this Period <b>502.98</b>
City <b>Cadyville</b> State <b>NY</b> Zip Code <b>12918</b>	Purpose of Disbursement <b>Payroll</b>	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00129-00150</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1890.11</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 58	
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial)  
**A. ADP Payroll Service**

Mailing Address 504 Clinton Center Dr STE 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement Payroll Taxes - See Memo's

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 30 / 2015

Amount of Each Disbursement this Period: 693.36

Transaction ID : 17-01-00130-0000

Category/Type

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

Mailing Address PO Box 15119

City Albany State NY Zip Code 12212-5119

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 30 / 2015

Amount of Each Disbursement this Period: 112.16

Transaction ID : 17-01-00130-00151

[MEMO ITEM]

Category/Type

Full Name (Last, First, Middle Initial)  
**c. Internal Revenue Service**

Mailing Address Tax Return Division  
PO Box 409101

City Ogden State UT Zip Code 84409

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 30 / 2015

Amount of Each Disbursement this Period: 581.20

Transaction ID : 17-01-00130-00152

[MEMO ITEM]

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 693.36

**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 43 OF 58	
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 23.87
City Clinton	State MS	
Zip Code 39056-5610	Purpose of Disbursement Workers Comp Insurance	Transaction ID : 17-01-00131-00153
Candidate Name	Category/ Type	
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>B. Democracy Engine, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 850 Quincy St NW #402		Amount of Each Disbursement this Period 6.02
City Washington	State DC	
Zip Code 20011	Purpose of Disbursement Merchant Fees	Transaction ID : 17-01-00145-00174
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 80.56
City Clinton	State MS	
Zip Code 39056-5610	Purpose of Disbursement Payroll Fee	Transaction ID : 17-01-00166-00202
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	110.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. CommonCentsConsulting, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2015	
Mailing Address 2910 E Gary Way			Amount of Each Disbursement this Period 2000.00	
City Phoenix	State AZ	Zip Code 85042	Transaction ID : 17-01-00140-00168	
Purpose of Disbursement Compliance & Accounting Services		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. NGP VAN, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2015	
Mailing Address 1101 15th St NW STE 500			Amount of Each Disbursement this Period 228.38	
City Washington	State DC	Zip Code 20005	Transaction ID : 17-01-00141-00169	
Purpose of Disbursement E-Mail Services		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Westerleigh Concepts</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2015	
Mailing Address 2 Hollywood Ct			Amount of Each Disbursement this Period 566.15	
City South Plainfield	State NJ	Zip Code 07080	Transaction ID : 17-01-00142-00170	
Purpose of Disbursement Banners		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2794.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Democracy Engine, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015	
Mailing Address 850 Quincy St NW #402			Amount of Each Disbursement this Period 13.52	
City Washington	State DC	Zip Code 20011	Transaction ID : 17-01-00151-00182	
Purpose of Disbursement Merchant Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Democracy Engine, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015	
Mailing Address 850 Quincy St NW #402			Amount of Each Disbursement this Period 42.97	
City Washington	State DC	Zip Code 20011	Transaction ID : 17-01-00153-00184	
Purpose of Disbursement Merchant Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. ADP Payroll Service</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2015	
Mailing Address 504 Clinton Center Dr STE 4400			Amount of Each Disbursement this Period 1890.12	
City Clinton	State MS	Zip Code 39056-5610	Transaction ID : 17-01-00146-0000	
Purpose of Disbursement Payroll - See Memo's		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1946.61
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

Full Name (Last, First, Middle Initial)  
**A. Margaret Lefevre**

Mailing Address 2195 Route 3

City Cadyville State NY Zip Code 12918

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 15 / 2015

Amount of Each Disbursement this Period  
502.98

Transaction ID : 17-01-00146-00176

[MEMO ITEM]

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

Mailing Address 13 Deland Way

City Plattsburgh State NY Zip Code 12901-4309

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 15 / 2015

Amount of Each Disbursement this Period  
1387.14

Transaction ID : 17-01-00146-00175

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**c. ADP Payroll Service**

Mailing Address 504 Clinton Center Dr STE 4400

City Clinton State MS Zip Code 39056-5610

Purpose of Disbursement Payroll Taxes - See Memo's

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 15 / 2015

Amount of Each Disbursement this Period  
693.35

Transaction ID : 17-01-00147-0000

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	693.35
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 58	
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 15 / 2015</b>
Mailing Address Tax Return Division PO Box 409101		Amount of Each Disbursement this Period <b>581.19</b>
City Ogden	State UT	Zip Code 84409
Purpose of Disbursement Payroll Taxes	Category/ Type	
Candidate Name	Transaction ID : <b>17-01-00147-00178</b>	
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:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. Department of Taxation</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 15 / 2015</b>
Mailing Address PO Box 15119		Amount of Each Disbursement this Period <b>112.16</b>
City Albany	State NY	Zip Code 12212-5119
Purpose of Disbursement Payroll Taxes	Category/ Type	
Candidate Name	Transaction ID : <b>17-01-00147-00177</b>	
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:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>c. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 15 / 2015</b>
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period <b>23.87</b>
City Clinton	State MS	Zip Code 39056-5610
Purpose of Disbursement Workers Comp Insurance	Category/ Type	
Candidate Name	Transaction ID : <b>17-01-00148-00179</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>23.87</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 58	
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Democracy Engine, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 850 Quincy St NW #402		Amount of Each Disbursement this Period 45.06 <b>Transaction ID : 17-01-00170-00206</b>
City Washington State DC Zip Code 20011	Purpose of Disbursement Merchant Fees	
Candidate Name	Category/Type	
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>B. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 80.56 <b>Transaction ID : 17-01-00167-00203</b>
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 3069.61 <b>Transaction ID : 17-01-00155-0000</b>
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll - See Memo's	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3195.23
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Whitney Buck Bobbin</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 13 Deland Way		Amount of Each Disbursement this Period 1387.13
City Plattsburgh	State NY	
Zip Code 12901-4309	Purpose of Disbursement Payroll	Transaction ID : 17-01-00155-00186
Candidate Name	Category/ Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Margaret Lefevre</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 2195 Route 3		Amount of Each Disbursement this Period 502.97
City Cadyville	State NY	
Zip Code 12918	Purpose of Disbursement Payroll	Transaction ID : 17-01-00155-00187
Candidate Name	Category/ Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Zachary Marshall</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 63 Beechwood Dr		Amount of Each Disbursement this Period 1179.51
City Glen Head	State NY	
Zip Code 11545	Purpose of Disbursement Payroll	Transaction ID : 17-01-00155-00191
Candidate Name	Category/ Type	
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)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 58	
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 1197.81
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll Taxes - See Memo's	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00156-0000</b>
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>B. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address Tax Return Division PO Box 409101		Amount of Each Disbursement this Period 961.12
City Ogden State UT Zip Code 84409	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00156-00189</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Department of Taxation</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address PO Box 15119		Amount of Each Disbursement this Period 236.69
City Albany State NY Zip Code 12212-5119	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00156-00188</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1197.81
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 33.32
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Workers Comp Insurance	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00157-00190</b>
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>B. Democracy Engine, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 850 Quincy St NW #402		Amount of Each Disbursement this Period 22.53
City Washington State DC Zip Code 20011	Purpose of Disbursement Merchant Fees	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00177-00213</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 85.11
City Clinton State MS Zip Code 39056-5610	Purpose of Disbursement Payroll Fee	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00184-00220</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	140.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lake Placid Center for the Arts</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 17 Algonquin Dr			Amount of Each Disbursement this Period 315.00 <b>Transaction ID : 17-03-00034-00034</b>
City Lake Placid	State NY	Zip Code 12946	
Purpose of Disbursement Event Admission		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Stubbs Printing, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 271B E Orvis St			Amount of Each Disbursement this Period 104.22 <b>Transaction ID : 17-01-00173-00209</b>
City Masena	State NY	Zip Code 13662	
Purpose of Disbursement Business Cards		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Democracy Engine, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 850 Quincy St NW #402			Amount of Each Disbursement this Period 1.13 <b>Transaction ID : 17-01-00198-00240</b>
City Washington	State DC	Zip Code 20011	
Purpose of Disbursement Merchant Fees		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	420.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 2714.07
City Clinton	State MS	
Zip Code 39056-5610	Purpose of Disbursement Payroll - See Memo's	Transaction ID : 17-01-00186-0000
Candidate Name	Category/Type	
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>B. Whitney Buck Bobbin</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 13 Deland Way		Amount of Each Disbursement this Period 1387.14
City Plattsburgh	State NY	
Zip Code 12901-4309	Purpose of Disbursement Payroll	Transaction ID : 17-01-00186-00222
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Margaret Lefevre</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 2195 Route 3		Amount of Each Disbursement this Period 502.98
City Cadyville	State NY	
Zip Code 12918	Purpose of Disbursement Payroll	Transaction ID : 17-01-00186-00223
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2714.07
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

Full Name (Last, First, Middle Initial)  
**A. Zachary Marshall**

Mailing Address 63 Beechwood Dr

City State Zip Code  
Glen Head NY 11545

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
823.95

Transaction ID : 17-01-00186-00224

[MEMO ITEM]

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

Mailing Address 504 Clinton Center Dr STE 4400

City State Zip Code  
Clinton MS 39056-5610

Purpose of Disbursement  
Payroll Taxes - See Memo's

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
991.60

Transaction ID : 17-01-00187-0000

Full Name (Last, First, Middle Initial)  
**c. Internal Revenue Service**

Mailing Address Tax Return Division  
PO Box 409101

City State Zip Code  
Ogden UT 84409

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
806.60

Transaction ID : 17-01-00187-00226

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 991.60

**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 55 OF 58			
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Department of Taxation</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address PO Box 15119		Amount of Each Disbursement this Period 185.00
City Albany	State NY Zip Code 12212-5119	
Purpose of Disbursement Payroll Taxes		Transaction ID : 17-01-00187-00225
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. ADP Payroll Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 504 Clinton Center Dr STE 4400		Amount of Each Disbursement this Period 30.17
City Clinton	State MS Zip Code 39056-5610	
Purpose of Disbursement Workers Comp Insurance		Transaction ID : 17-01-00188-00227
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)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 742 Bear Swamp Rd		Amount of Each Disbursement this Period 98.00
City Peru	State NY Zip Code 12972	
Purpose of Disbursement Postage		Transaction ID : 17-03-00039-00039
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)	Category/Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	128.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 58			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. Democracy Engine, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015	
Mailing Address 850 Quincy St NW #402			Amount of Each Disbursement this Period 37.70	
City Washington	State DC	Zip Code 20011	Transaction ID : 17-01-00195-00237	
Purpose of Disbursement Merchant Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ADP Payroll Service</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015	
Mailing Address 504 Clinton Center Dr STE 4400			Amount of Each Disbursement this Period 85.11	
City Clinton	State MS	Zip Code 39056-5610	Transaction ID : 17-01-00213-00260	
Purpose of Disbursement Payroll Fee		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015	
Mailing Address 1 Hacker Way			Amount of Each Disbursement this Period 250.22	
City Menlo Park	State CA	Zip Code 94205	Transaction ID : 17-03-00045-00045	
Purpose of Disbursement Web Advertisements		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	373.03
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 58	
	<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)  
**Derrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Democracy Engine, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address 850 Quincy St NW #402		Amount of Each Disbursement this Period 37.70
City Washington State DC Zip Code 20011	Purpose of Disbursement Merchant Fees	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00192-00234</b>
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>B. Democracy Engine, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 850 Quincy St NW #402		Amount of Each Disbursement this Period 2.07
City Washington State DC Zip Code 20011	Purpose of Disbursement Merchant Fees	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00208-00255</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Democracy Engine, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 850 Quincy St NW #402		Amount of Each Disbursement this Period 409.35
City Washington State DC Zip Code 20011	Purpose of Disbursement Merchant Fees	
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00224-00272</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	449.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

Full Name (Last, First, Middle Initial) <b>A. ACTBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 31 / 2015</b>
Mailing Address <b>PO Box 382110</b>		Amount of Each Disbursement this Period <b>43.48</b>
City <b>Cambridge</b> State <b>MA</b> Zip Code <b>02238</b>	Purpose of Disbursement <b>Merchant Fees</b>	
Candidate Name		Category/Type
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)	<b>Transaction ID : 17-01-00238-00291</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>43.48</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>32634.94</b>