

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Citizens for Boyle

ADDRESS (number and street)

499 S. Capitol St. SW

Suite 422

Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

C C00543363

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

PA

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

Type or Print Name of Treasurer Lindsay Angerholzer

Signature of Treasurer Lindsay Angerholzer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Citizens for Boyle

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	151640.95	425479.95
(b) Total Contribution Refunds (from Line 20(d))	250.00	1310.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	151390.95	424169.95
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	66386.26	181490.22
(b) Total Offsets to Operating Expenditures (from Line 14).....	34.35	489.64
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	66351.91	181000.58
8. Cash on Hand at Close of Reporting Period (from Line 27).....	606552.43	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Citizens for Boyle

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y 09 / 30 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	59660.50	115004.50
(ii) Unitemized	1700.00	5995.00
(iii) TOTAL of contributions from individuals	61360.50	120999.50
(b) Political Party Committees.....	8.67	8.67
(c) Other Political Committees (such as PACs).....	89050.00	303250.00
(d) The Candidate	1221.78	1221.78
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	151640.95	425479.95
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	34.35	489.64
15. OTHER RECEIPTS (Dividends, Interest, etc.)	6.04	40.17
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	151681.34	426009.76

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	66386.26	181490.22
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	40000.00
(b) Of All Other Loans	0.00	5481.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	45481.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	250.00	310.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	250.00	1310.00
21. OTHER DISBURSEMENTS	1926.00	3926.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	68562.26	232207.22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	523433.35
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	151681.34
25. SUBTOTAL (add Line 23 and Line 24).....	675114.69
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	68562.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	606552.43

**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 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Daniel Abramowicz
 Mailing Address 1 Crown Way
 City Philadelphia State PA Zip Code 19154-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Crown Cork & Seal Occupation Exec VP
 Receipt For: 2016
 Primary General
 Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2015
Transaction ID : C10605898
 Amount of Each Receipt this Period
 1000.00
 Election Cycle-to-Date
 1000.00

B. Full Name (Last, First, Middle Initial)
Lawrence Beaser
 Mailing Address 834 Chestnut St
 Apt PH-121
 City Philadelphia State PA Zip Code 19107-5127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blank Rome LLP Occupation Attorney
 Receipt For: 2016
 Primary General
 Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2015
Transaction ID : C10588565
 Amount of Each Receipt this Period
 1000.00
 Election Cycle-to-Date
 1000.00

C. Full Name (Last, First, Middle Initial)
Marc Bernstein
 Mailing Address 1500 Bardsey Dr
 City Ambler State PA Zip Code 19002-1547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PennMutual/MWealth Advisors Occupation Financial Planner/Founder
 Receipt For: 2016
 Primary General
 Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2015
Transaction ID : C10584583
 Amount of Each Receipt this Period
 250.00
 Election Cycle-to-Date
 250.00

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

2250.00

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

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

FOR LINE NUMBER: PAGE 6 OF 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Jack Bienenfeld

Mailing Address 828 Red Lion Rd, Ste E1

City Philadelphia State PA Zip Code 19115

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

Name of Employer Inter County Development Corp. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2015

Transaction ID : C10593687

Amount of Each Receipt this Period
 _____ 2700.00

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

Mailing Address 7138 Bustleton Ave

City Philadelphia State PA Zip Code 19149-1233

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

Name of Employer Philly Gas Inc Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : C10609697

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
Lenard A. Cohen Esq.

Mailing Address 125 Old Gulph Rd

City Wynnewood State PA Zip Code 19096-1016

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
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2015

Transaction ID : C10605097

Amount of Each Receipt this Period
 _____ 1000.00

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

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

_____ 3950.00

**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 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 15 Birch Dr

City Plainview State NY Zip Code 11803-2902

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

Name of Employer Doug Elliman Occupation Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2015

Transaction ID : C10603185

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
John Conway

Mailing Address 1 Crown Way

City Philadelphia State PA Zip Code 19154-4501

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

Name of Employer Crown Cork & Seal Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2015

Transaction ID : C10605893

Amount of Each Receipt this Period
 2700.00

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

Mailing Address 1 Crown Way

City Philadelphia State PA Zip Code 19154-4501

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

Name of Employer Crown Cork & Seal Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2015

Transaction ID : C10605895

Amount of Each Receipt this Period
 2300.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 208 Noland St

City Falls Church State VA Zip Code 22046-3513

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

Name of Employer CollaborateUp Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2015

Transaction ID : C10588919

Amount of Each Receipt this Period
10.00

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

Mailing Address 208 Noland St

City Falls Church State VA Zip Code 22046-3513

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

Name of Employer CollaborateUp Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2015

Transaction ID : C10588920

Amount of Each Receipt this Period
490.00

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

Mailing Address 3231 Walnut St Rm 401

City Philadelphia State PA Zip Code 19104-6202

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

Name of Employer University of Pennsylvania Occupation Assistant Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : C10603786

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
James Cuorato Jr

Mailing Address 160 Shelly Ln

City Philadelphia State PA Zip Code 19115-2709

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

Name of Employer Independence Visitor Center Corp. Occupation President & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2015

Transaction ID : C10593686

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Glenn Davidson

Mailing Address 800 North Glebe Road

City Arlington State VA Zip Code 22203

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

Name of Employer Accenture Federal Services Occupation Managing Director, Business Process Ou

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2015

Transaction ID : C10589961

Amount of Each Receipt this Period
 500.00

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

Mailing Address 13037 Lindsay St

City Philadelphia State PA Zip Code 19116-1715

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : C10607155

Amount of Each Receipt this Period
 100.00

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

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

1600.00

**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 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 729 Whitman Drive

City State Zip Code
Blackwood NJ 08012

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

Name of Employer Occupation
Pennoni Associates Engineer

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
07 / 13 / 2015

Transaction ID : C10588581

Amount of Each Receipt this Period
250.00

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

Mailing Address One Crown Way

City State Zip Code
Philadelphia PA 19154

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

Name of Employer Occupation
Crown Cork & Seal President & COO

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
09 / 20 / 2015

Transaction ID : C10605896

Amount of Each Receipt this Period
2000.00

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

Mailing Address 8 Moredun Place

City State Zip Code
Philadelphia PA 19115

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

Name of Employer Occupation
AmeriHealth Caritas VP of Government and External Affairs

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
07 / 13 / 2015

Transaction ID : C10588590

Amount of Each Receipt this Period
1000.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Todd Duffy

Mailing Address 67-15 102 St. Apt 3C

City Forest Hills State NY Zip Code 11375

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

Name of Employer Duffy Amedeo 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
 09 / 08 / 2015

Transaction ID : C10603186

Amount of Each Receipt this Period
 1500.00

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

Mailing Address 1315 E Montgomery Ave

City Philadelphia State PA Zip Code 19125-2701

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

Name of Employer The Dunphy Group 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
 09 / 20 / 2015

Transaction ID : C10605889

Amount of Each Receipt this Period
 250.00

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

Mailing Address 19 Soundview Ln

City Sands Point State NY Zip Code 11050-1342

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

Name of Employer Langsam Property Services 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
 09 / 08 / 2015

Transaction ID : C10603184

Amount of Each Receipt this Period
 1500.00

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 12 OF 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 106 Hampton Ln

City State Zip Code
Blue Bell PA 19422-2605

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

Name of Employer Occupation
Fox Chase Cancer Center President & CEO

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
 07 / 10 / 2015

Transaction ID : C10588365

Amount of Each Receipt this Period
1000.00

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

Mailing Address 3349 Wellington St

City State Zip Code
Philadelphia PA 19149-1615

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

Name of Employer Occupation
Magnetic Metals Corp. Business 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
 07 / 07 / 2015

Transaction ID : C10588034

Amount of Each Receipt this Period
250.00

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

Mailing Address 324 Holmecrest Rd

City State Zip Code
Jenkintown PA 19046-3820

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

Name of Employer Occupation
Crown Cork & Seal Chief Counsel

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
 09 / 20 / 2015

Transaction ID : C10605897

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)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 13 OF 88

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 3420 Paper Mill Rd

City State Zip Code
 Huntingdon Valley PA 19006-3724

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

Name of Employer Occupation
 ULMC Self Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 09 2015

Transaction ID : C10588070

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Abby F. Gilbert

Mailing Address 318 Peachtree Drive

City State Zip Code
 Jenkintown PA 19046

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

Name of Employer Occupation
 Holocaust Awareness Museum Institutional Advancement

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
 07 13 2015

Transaction ID : C10588593

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Lynne Gold-Bikin

Mailing Address 307 Hughes Rd

City State Zip Code
 King Of Prussia PA 19406-3713

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

Name of Employer Occupation
 Weber Gallagher Simpson Stapleton Fire Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 10 2015

Transaction ID : C10588331

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Shawn Golhar

Mailing Address 260 Greene Ave
Apt 3

City State Zip Code
Brooklyn NY 11238-1303

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

Name of Employer Occupation
Barclays Research

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : C10605825

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Darlene W. Greller

Mailing Address 6004 Pidcock Creek Rd

City State Zip Code
New Hope PA 18938-9310

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

Name of Employer Occupation
Morris Iron and Steel Company Administrator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : C10589549

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Ronald W. Greller

Mailing Address 6004 Pidcock Creek Rd

City State Zip Code
New Hope PA 18938-9310

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

Name of Employer Occupation
Morris Iron and Steel Co., Inc. President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : C10589547

Amount of Each Receipt this Period
2700.00

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

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

5650.00

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

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

FOR LINE NUMBER: PAGE 15 OF 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Luke Halinski

Mailing Address 101 Hedgerow Way

City Lansdale State PA Zip Code 19446-5071

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

Name of Employer Student Occupation Volunteer

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
 07 / 07 / 2015

Transaction ID : C10586628

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Patricia Hennessy

Mailing Address 89 Lynne Cir

City Paoli State PA Zip Code 19301-1026

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

Name of Employer Conrad O'Brien Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2015

Transaction ID : C10588587

Amount of Each Receipt this Period
250.00

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

Mailing Address 23 Wenwood Dr

City Glen Head State NY Zip Code 11545-3127

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

Name of Employer Tasty Brands Occupation CEO and President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : C10605198

Amount of Each Receipt this Period
1500.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 413 W Mermaid Ln

City Philadelphia State PA Zip Code 19118-4203

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

Name of Employer Kleinbard 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
 07 / 07 / 2015

Transaction ID : C10586495

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Erran Kagan

Mailing Address 22 Old Pond Rd

City Great Neck State NY Zip Code 11023-1004

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

Name of Employer Electro Industries Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2015

Transaction ID : C10603187

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
Larry R Kaiser

Mailing Address 408 Barbara Ln

City Bryn Mawr State PA Zip Code 19010-2128

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

Name of Employer Temple University Health System Occupation President and CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2015

Transaction ID : C10588582

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 17 OF 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 2215 Pine St

City Philadelphia State PA Zip Code 19103-6515

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

Name of Employer McKinsey Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : C10588563

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Sukru Kilic

Mailing Address 9 Pebble Ln

City Cherry Hill State NJ Zip Code 08002-1555

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

Name of Employer Cantor Fitzgerald Occupation Software Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : C10603785

Amount of Each Receipt this Period
 400.00

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

Mailing Address 1355 17th St NW Apt 503

City Washington State DC Zip Code 20036-1935

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

Name of Employer United Macedonian Diaspora Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : C10605667

Amount of Each Receipt this Period
 250.00

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 18 OF 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 10769 Jeanes St

City Philadelphia State PA Zip Code 19116-3315

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

Name of Employer Amerihealth Caritas Occupation Programmer, Sr.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **875.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2015

Transaction ID : C10588048

Amount of Each Receipt this Period
250.00

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

Mailing Address 10769 Jeanes St

City Philadelphia State PA Zip Code 19116-3315

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

Name of Employer Amerihealth Caritas Occupation Programmer, Sr.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **875.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : C10607189

Amount of Each Receipt this Period
50.00

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

Mailing Address 9 Colonial Rd

City White Plains State NY Zip Code 10605-2201

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

Name of Employer LNK Partners Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2015

Transaction ID : C10603189

Amount of Each Receipt this Period
1500.00

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

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

1800.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 19 OF 88

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Kristin Leary

Mailing Address 3446 Connecticut Ave. NW
 Apt 402

City Washington State DC Zip Code 20008

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

Name of Employer Leary Ventures Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 200.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2015

Transaction ID : C10605902

Amount of Each Receipt this Period
 200.50

B. Full Name (Last, First, Middle Initial)
Linda Chun-yung Lin

Mailing Address 720 Wyndrise Dr

City Blue Bell State PA Zip Code 19422-2904

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

Name of Employer Linda C Lin Studio (self-employed) Occupation Artist

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
 07 / 09 / 2015

Transaction ID : C10588076

Amount of Each Receipt this Period
 250.00

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

Mailing Address 117 Cheston Ln

City Ambler State PA Zip Code 19002-2753

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

Name of Employer Lindy Property Management Occupation Officer

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
 07 / 31 / 2015

Transaction ID : C10593493

Amount of Each Receipt this Period
 500.00

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

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

950.50

**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 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 4822 30th St S

City Arlington State VA Zip Code 22206-1508

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

Name of Employer Monument Strategies Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : C10605206

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ari Mittleman

Mailing Address 1455 Pennsylvania Ave NW Ste 250

City Washington State DC Zip Code 20004-1030

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

Name of Employer Roberti+White, LLC Occupation 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
 09 / 21 / 2015

Transaction ID : C10605219

Amount of Each Receipt this Period
500.00

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

Mailing Address 522 Red Coat Lane

City Phoenixville State PA Zip Code 19460

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

Name of Employer Turnberry Solutions Occupation Business Analyst

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
 08 / 31 / 2015

Transaction ID : C10603782

Amount of Each Receipt this Period
300.00

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 21 OF 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 11 Cow Ln

City State Zip Code
Great Neck NY 11024-1516

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

Name of Employer Occupation
Sky Management Corp. President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : C10605199

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Sait Onal

Mailing Address 2007 Wynfield Dr

City State Zip Code
Lancaster PA 17601-4967

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

Name of Employer Occupation
Transamerica District Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : C10603787

Amount of Each Receipt this Period
500.00

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

Mailing Address 1057 Almshouse Rd

City State Zip Code
Warminster PA 18974-1253

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

Name of Employer Occupation
BSI Construction, LLC Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : C10603788

Amount of Each Receipt this Period
300.00

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

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

2300.00

**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 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 216 Wyncote Rd

City Jenkintown State PA Zip Code 19046-3131

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

Name of Employer BP Geotech, Inc. Occupation engineer

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
 07 / 10 / 2015

Transaction ID : C10588406

Amount of Each Receipt this Period
250.00

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

Mailing Address 415 Hillside Ave

City Jenkintown State PA Zip Code 19046-2116

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

Name of Employer Cooper University Healthcare Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : C10607148

Amount of Each Receipt this Period
10.00

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

Mailing Address 2 Jennifer Lane

City Churchville State PA Zip Code 18966

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

Name of Employer GM Capital Occupation General Manager

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
 09 / 20 / 2015

Transaction ID : C10605888

Amount of Each Receipt this Period
1000.00

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

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

1260.00

**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 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Brian Regli

Mailing Address 815 Pardee Ln

City State Zip Code
Wyncote PA 19095-1609

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

Name of Employer Occupation
Revere Suburban Realty Real Estate Professional

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
07 / 06 / 2015

Transaction ID : C10585553

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Kathryn E. Ruffalo

Mailing Address 20423 Rosemallow Court

City State Zip Code
Sterling VA 20165

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

Name of Employer Occupation
Self Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : C10603794

Amount of Each Receipt this Period
500.00

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

Mailing Address 18 Oxford Blvd

City State Zip Code
Great Neck NY 11023-2239

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

Name of Employer Occupation
Panor Corporation Senior VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 08 / 2015

Transaction ID : C10603190

Amount of Each Receipt this Period
1500.00

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

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

4700.00

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

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

FOR LINE NUMBER: PAGE 24 OF 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Rejep Sayin Jr

Mailing Address 2927 Kensington Ave

City Philadelphia State PA Zip Code 19134-3030

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

Name of Employer Grape Leaves Grill Occupation Owner & General Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : C10603783

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Mitchell Shore

Mailing Address 124 Overhill Rd

City Bala Cynwyd State PA Zip Code 19004-2229

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

Name of Employer Kolsby Gordon Robin Shore Bezar 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
 09 / 29 / 2015

Transaction ID : C10609699

Amount of Each Receipt this Period
 250.00

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

Mailing Address 7 Windsor Ave

City Elkins Park State PA Zip Code 19027-2960

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

Name of Employer Anderson Creek Club Occupation Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 20 / 2015

Transaction ID : C10605887

Amount of Each Receipt this Period
 1000.00

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

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

1550.00

**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 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Eugene Shusman

Mailing Address 1550 Cherry Ln

City State Zip Code
Jenkintown PA 19046-1402

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

Name of Employer Occupation
Zionist Organization of America Chairman of the Board - Greater Philad

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : C10610030

Amount of Each Receipt this Period
500.00

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

Mailing Address 5813 Mossrock Dr

City State Zip Code
Rockville MD 20852-3238

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

Name of Employer Occupation
self employed attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : C10607147

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Andrew E Stecki Esq

Mailing Address 604 S Washington Sq
Apt 3017

City State Zip Code
Philadelphia PA 19106-4131

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

Name of Employer Occupation
Self Lawyer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : C10605218

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 26 OF 88
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Tania Taylor

Mailing Address **PO Box 471**

City State Zip Code
State Line PA 17263-0471

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

Name of Employer Occupation
TM Enterprises CEO

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
09 / 16 / 2015

Transaction ID : C10604547

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Joshua Wanderer

Mailing Address **66 Chauncey Ln**

City State Zip Code
Lawrence NY 11559-2824

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

Name of Employer Occupation
Law Office of Joshua S. Wanderer Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 21 / 2015

Transaction ID : C10605201

Amount of Each Receipt this Period
1500.00

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

Mailing Address **344 S. Manoa Road**

City State Zip Code
Havertown PA 19083

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

Name of Employer Occupation
Affairs To Be Remembered Founder

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
07 / 13 / 2015

Transaction ID : C10588577

Amount of Each Receipt this Period
500.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Pazuniak Law Office LLC

Mailing Address 1201 N Orange St
Ste 7114

City: Wilmington State: DE Zip Code: 19801-1155

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: 07 / 13 / 2015

Transaction ID : C10588588

Amount of Each Receipt this Period: 250.00

LLC - Members below if itemized. Permissible funds.

B. Full Name (Last, First, Middle Initial)
George Pazuniak

Mailing Address 1201 N Orange St
Ste 7114

City: Wilmington State: DE Zip Code: 19801-1155

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

Name of Employer: Pazuniak Law Office LLC Occupation: Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 13 / 2015

Transaction ID : C10588589

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]
*

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

Mailing Address 2005 Market St
Ste 2600

City: Philadelphia State: PA Zip Code: 19103-7018

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

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 19 / 2015

Transaction ID : C10598920

Amount of Each Receipt this Period: 500.00

PARTNERSHIP--partners below if itemized

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 2005 Market St
Ste 2600

City Philadelphia State PA Zip Code 19103-7018

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

Name of Employer Stradley Ronan Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2015

Transaction ID : C10598921

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Fox Rothschild LLP

Mailing Address 231 State Street 7th Floor

City Harrisburg State PA Zip Code 17101

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2015

Transaction ID : C10599500

Amount of Each Receipt this Period
1500.00

LLC - Members below if itemized. Permissible funds.

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

Mailing Address 2433 Reed St

City Phila State PA Zip Code 19146

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

Name of Employer Fox Rothchild LLP Occupation Attorney at Law

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2015

Transaction ID : C10600324

Amount of Each Receipt this Period
1500.00

[MEMO ITEM]
*

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Law Offices of R Emmett Madden

Mailing Address 101 Greenwood Ave

City Jenkintown State PA Zip Code 19046

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 20 / 2015

Transaction ID : C10605890

Amount of Each Receipt this Period
 250.00

PARTNERSHIP--partners below if itemized

B. Full Name (Last, First, Middle Initial)
R. Emmett Madden

Mailing Address 101 Greenwood Ave 5th Fl

City Jenkintown State PA Zip Code 19046

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

Name of Employer Occupation
 Law Offices of R. Emmett Madden Lawyer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 20 / 2015

Transaction ID : C10605891

Amount of Each Receipt this Period
 250.00

[MEMO ITEM]
*

C. Full Name (Last, First, Middle Initial)
Dilworth Paxson LLP

Mailing Address 1500 Market St Ste 3500E

City Philadelphia State PA Zip Code 19102-2101

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : C10606234

Amount of Each Receipt this Period
 1000.00

PARTNERSHIP--partners below if itemized

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 1500 Market St
Ste 3500E

City Philadelphia State PA Zip Code 19102-2101

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

Name of Employer Dilworth Paxson Occupation Attorney

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
 09 / 25 / 2015

Transaction ID : C10606239

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Swanson Street Associates

Mailing Address 630 Sentry Parkway
Suite 300

City Blue Bell State PA Zip Code 19422

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

Name of Employer Occupation

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
 09 / 30 / 2015

Transaction ID : C10610031

Amount of Each Receipt this Period
2700.00

LLC - Members below if itemized. Permissible funds.

C. Full Name (Last, First, Middle Initial)
Seth A. Shapiro

Mailing Address 630 Sentry Parkway
Suite 300

City Blue Bell State PA Zip Code 19422

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

Name of Employer The Goldenberg Group Occupation Executive Vice 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
 09 / 30 / 2015

Transaction ID : C10610032

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]
*

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

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

2700.00

59660.50

**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 88
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00000935

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
 09 / 30 / 2015

Transaction ID : C10612431

Amount of Each Receipt this Period
 8.67

* In-Kind: In-Kind Events

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).....

8.67

8.67

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

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

FOR LINE NUMBER: PAGE 32 OF 88
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 MASSACHUSETTS AVE. NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2015

Transaction ID : C10599498

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 MASSACHUSETTS AVE. NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : C10609703

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
AMER POST WORK UN AFL-CIO PHIL PA AREA LOC COMM/POL ACT (PHIL PA AREA LOC APWU COMM/PO ACT)

Mailing Address 1300 L STREET NW

City State Zip Code
WASHINGTON DC 20005

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : C10610033

Amount of Each Receipt this Period
2500.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 33 OF 88
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 1120 Connecticut Ave NW
Ste 600

City Washington State DC Zip Code 20036-3971

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2015

Transaction ID : C10605900

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036-5665

FEC ID number of contributing federal political committee. **C C90011172**

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
 07 / 13 / 2015

Transaction ID : C10588595

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036-5665

FEC ID number of contributing federal political committee. **C C90011172**

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
 07 / 23 / 2015

Transaction ID : C10591310

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 34 OF 88
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036-5665

FEC ID number of contributing federal political committee. **C** C90011172

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
 09 / 30 / 2015

Transaction ID : C10609700

Amount of Each Receipt this Period
500.00

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

Mailing Address 800 TENTH STREET, NW
TWO CITYCENTER, SUITE 400

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : C10609693

Amount of Each Receipt this Period
1000.00

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

Mailing Address PALLADIAN 1
220 LEIGH FARM RD

City DURHAM State NC Zip Code 27707

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : C10609690

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 35 OF 88
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 1505 PRINCE STREET
SUITE 300

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00024968**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2015

Transaction ID : C10605905

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERIPAC: THE FUND FOR A GREATER AMERICA

Mailing Address 700 13TH STREET, NW
SUITE 600

City State Zip Code
WASHINGTON DC 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
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : C10609695

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 1300 Morris Dr
Ste 100

City State Zip Code
Chesterbrook PA 19087-5559

FEC ID number of contributing federal political committee. **C C00400929**

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
 07 / 15 / 2015

Transaction ID : C10589960

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 36 OF 88
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 1300 Morris Dr
Ste 100

City State Zip Code
Chesterbrook PA 19087-5559

FEC ID number of contributing federal political committee. **C** C00400929

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
 09 / 20 / 2015

Transaction ID : C10605899

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ARKEMA POLITICAL ACTION COMMITTEE

Mailing Address 900 FIRST AVE

City State Zip Code
KING OF PRUSSIA PA 19406

FEC ID number of contributing federal political committee. **C** C00182980

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
 07 / 15 / 2015

Transaction ID : C10589963

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BRISTOL-MYERS SQUIBB CO. EMPLOYEE POLITICAL ADVOCACY FUND FOR INNOVATION

Mailing Address 777 SCUDDERS MILL ROAD

City State Zip Code
PLAINSBORO NJ 08536

FEC ID number of contributing federal political committee. **C** C00035675

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2015

Transaction ID : C10597903

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 37 OF 88
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
CINTAS CORPORATION PARTNERS PAC

Mailing Address **6800 CINTAS BOULEVARD**

City **MASON** State **OH** Zip Code **45040**

FEC ID number of contributing federal political committee. **C C00449165**

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
09 / 21 / 2015

Transaction ID : C10605906

Amount of Each Receipt this Period
500.00

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

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

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

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2015

Transaction ID : C10609707

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
CROWN CORK & SEAL COMPANY INC. PAC

Mailing Address **ONE CROWN WAY**

City **PHILADELPHIA** State **PA** Zip Code **19154**

FEC ID number of contributing federal political committee. **C C00254268**

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
09 / 30 / 2015

Transaction ID : C10609709

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
CSL BEHRING EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1020 1st Ave

City State Zip Code
King Of Prussia PA 19406-1310

FEC ID number of contributing federal political committee. **C** C00422501

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : C10609701

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 WESTPARK DRIVE

City State Zip Code
MCLEAN VA 22102

FEC ID number of contributing federal political committee. **C** C00040998

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
 09 / 30 / 2015

Transaction ID : C10609704

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Enterprise Holdings Inc. PAC

Mailing Address 600 CORPORATE PARK DRIVE

City State Zip Code
ST. LOUIS MO 63105

FEC ID number of contributing federal political committee. **C** C00219642

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2015

Transaction ID : C10588585

Amount of Each Receipt this Period
3000.00

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

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

9000.00

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

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

FOR LINE NUMBER: PAGE 39 OF 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELON PAC)

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 400 EAST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

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

Transaction ID : C10594927

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
FLORIDA CONGRESSIONAL COMMITTEE

Mailing Address 6100 HOLLYWOOD BLVD
SUITE 305

City HOLLYWOOD State FL Zip Code 33024

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : C10603792

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Friends of Mark Levy

Mailing Address PO Box 176

City Norristown State PA Zip Code 19404-0176

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
 07 / 13 / 2015

Transaction ID : C10588578

Amount of Each Receipt this Period
250.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 40 OF 88
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
GLAXOSMITHKLINE LLC PAC (GSK PAC)

Mailing Address FIVE MOORE DRIVE
PO BOX 13358

City State Zip Code
RES. TRIANGLE PARK NC 27709

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : C10605907

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
HUMAN RIGHTS CAMPAIGN PAC

Mailing Address 1640 RHODE ISLAND AVE NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C C00235853**

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
 09 / 23 / 2015

Transaction ID : C10605886

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
HUMANE SOCIETY LEGISLATIVE FUND POLITICAL ACTION COMMITTEE

Mailing Address 2100 L STREET, NW
SUITE 310

City State Zip Code
WASHINGTON DC 20037

FEC ID number of contributing federal political committee. **C C00466813**

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
 07 / 15 / 2015

Transaction ID : C10589962

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 41 OF 88
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial)
HUMANE SOCIETY LEGISLATIVE FUND POLITICAL ACTION COMMITTEE

Mailing Address **2100 L STREET, NW
SUITE 310**

City State Zip Code
WASHINGTON DC 20037

FEC ID number of contributing federal political committee. **C C00466813**

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
07 23 2015

Transaction ID : C10590603

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
INDEPENDENCE BLUE CROSS PAC (IBC PAC)

Mailing Address **1901 MARKET STREET**

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C C00450056**

Name of Employer Occupation

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 30 2015

Transaction ID : C10592305

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
INDEPENDENCE BLUE CROSS PAC (IBC PAC)

Mailing Address **1901 MARKET STREET**

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C C00450056**

Name of Employer Occupation

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 30 2015

Transaction ID : C10609705

Amount of Each Receipt this Period
1000.00

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

3000.00

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

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

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

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 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial)
INT'L. ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENTAL & REINFORCING IRON WORKERS (IPAL)

A. Mailing Address 1750 NEW YORK AVE. NW
SUITE 400

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00027359

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
07 / 20 / 2015

Transaction ID : C10589755

Amount of Each Receipt this Period
5000.00

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

B. Mailing Address 1750 NEW YORK AVE NW

City State Zip Code
WASHINGTON DC 20006

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 10 / 2015

Transaction ID : C10597529

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF BOILERMAKERS CAMPAIGN ASSISTANCE FUND

C. Mailing Address 753 STATE AVE.
SUITE 565

City State Zip Code
KANSAS CITY KS 66101

FEC ID number of contributing federal political committee. **C** C00005157

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
08 / 31 / 2015

Transaction ID : C10603790

Amount of Each Receipt this Period
1000.00

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

7000.00

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

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

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

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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

A. Mailing Address 900 SEVENTH ST, NW

City State Zip Code
WASHINGTON DC 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
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 30 2015

Transaction ID : C10610035

Amount of Each Receipt this Period
 5000.00

Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

B. Mailing Address 900 SEVENTH ST, NW

City State Zip Code
WASHINGTON DC 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
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 30 2015

Transaction ID : C10610034

Amount of Each Receipt this Period
 5000.00

Full Name (Last, First, Middle Initial)
Lockheed Martin Employees' Political Action Commit

C. Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City State Zip Code
ARLINGTON VA 22202

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

Name of Employer Occupation

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 17 2015

Transaction ID : C10597904

Amount of Each Receipt this Period
 1000.00

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

11000.00

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

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

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FOR LINE NUMBER: PAGE 44 OF 88
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 16011 NE 36TH WAY
BOX 97017

City State Zip Code
REDMOND WA 98073

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : C10589756

Amount of Each Receipt this Period
1500.00

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

Mailing Address 1325 MASSACHUSETTS AVE., NW

City State Zip Code
WASHINGTON DC 20005

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : C10609698

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF POSTAL SUPERVISORS PAC

Mailing Address 1727 KING ST
SUITE 400

City State Zip Code
ALEXANDRIA VA 22311

FEC ID number of contributing federal political committee. **C C00092957**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2015

Transaction ID : C10599967

Amount of Each Receipt this Period
1000.00

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

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

3500.00

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

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FOR LINE NUMBER: PAGE 45 OF 88
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial)
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

A. Mailing Address 25 MASSACHUSETTS AVENUE, NW #100

City State Zip Code
WASHINGTON DC 20001

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : C10591273

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
National Emergency Medicine PAC

B. Mailing Address 1125 EXECUTIVE CIRCLE

City State Zip Code
IRVING TX 75038

FEC ID number of contributing federal political committee. **C** C00140061

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
07 / 13 / 2015

Transaction ID : C10588576

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION

C. Mailing Address 1201 16TH STREET NW STE 418

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00003251

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
09 / 30 / 2015

Transaction ID : C10608353

Amount of Each Receipt this Period
2000.00

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

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

4000.00

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 88
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
PLASTERERS' AND CEMENT MASONS' ACTION COMMITTEE

Mailing Address 11720 BELTSVILLE DRIVE
SUITE 700

City State Zip Code
BELTSVILLE MD 20705

FEC ID number of contributing federal political committee. **C C00134742**

Name of Employer Occupation

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
 09 / 15 / 2015

Transaction ID : C10604475

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
PPL People for Good Government

Mailing Address TWO NORTH NINTH STREET
GENTW2

City State Zip Code
ALLENTOWN PA 18101

FEC ID number of contributing federal political committee. **C C00228106**

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
 08 / 03 / 2015

Transaction ID : C10593690

Amount of Each Receipt this Period
1000.00

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

Mailing Address 751 BROAD STREET
14TH FLOOR

City State Zip Code
NEWARK NJ 07102

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : C10608352

Amount of Each Receipt this Period
1500.00

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

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

5200.00

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

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

FOR LINE NUMBER: PAGE 47 OF 88
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
SAP AMERICA INC PAC

Mailing Address 3999 WEST CHESTER PIKE

City State Zip Code
NEWTOWN SQUARE PA 19703

FEC ID number of contributing federal political committee. **C C00367375**

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
 09 / 30 / 2015

Transaction ID : C10609706

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 MASSACHUSETTS AVE NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C C00004036**

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
 07 / 13 / 2015

Transaction ID : C10588596

Amount of Each Receipt this Period
 4500.00

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

Mailing Address 300 NEW JERSEY AVENUE, NW
SUITE 1000

City State Zip Code
WASHINGTON DC 20001

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2015

Transaction ID : C10590399

Amount of Each Receipt this Period
 1000.00

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

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

6500.00

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

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

FOR LINE NUMBER: PAGE 48 OF 88
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 440

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : C10605885

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : C10609696

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
The Committee for a Livable Future

Mailing Address 232 NE 9TH

City PORTLAND State OR Zip Code 97232

FEC ID number of contributing federal political committee. **C** C00323352

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2015

Transaction ID : C10590602

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
THE DOW CHEMICAL COMPANY EMPLOYEES PAC (DOWPAC)

Mailing Address 2030 DOW CENTER

City MIDLAND State MI Zip Code 48674

FEC ID number of contributing federal political committee. **C** C00074096

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
 08 / 24 / 2015

Transaction ID : C10600504

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
THE VANGUARD GROUP COMMITTEE FOR RESPONSIBLE GOVERNMENT

Mailing Address 975 F STREET NW
SUITE 500

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00410266

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
 08 / 10 / 2015

Transaction ID : C10597530

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00008268

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
 07 / 20 / 2015

Transaction ID : C10589754

Amount of Each Receipt this Period
 2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
TURKISH COALITION MIDWEST PAC AKA TC-MIDWEST-PAC

Mailing Address 1844 N. HOYNE AVE.

City CHICAGO State IL Zip Code 60647

FEC ID number of contributing federal political committee. **C** C00530865

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
 09 / 20 / 2015

Transaction ID : C10605903

Amount of Each Receipt this Period
 100.00

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

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

City WILMINGTON State DE Zip Code 19850

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : C10609702

Amount of Each Receipt this Period
 1000.00

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).....

1100.00

89050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 88
	<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	

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

NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Brendan Boyle

Mailing Address 15040 Kelvin Ave.

City Philadelphia State PA Zip Code 19116

FEC ID number of contributing federal political committee. **C H4PA13199**

Name of Employer U.S. House of Representatives Occupation Congressman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1276.36

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

Transaction ID : C10610293

Amount of Each Receipt this Period
812.68

* In-Kind: Travel - Air Fare

B. Full Name (Last, First, Middle Initial)
Brendan Boyle

Mailing Address 15040 Kelvin Ave.

City Philadelphia State PA Zip Code 19116

FEC ID number of contributing federal political committee. **C H4PA13199**

Name of Employer U.S. House of Representatives Occupation Congressman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1276.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 07 / 2015

Transaction ID : C10610294

Amount of Each Receipt this Period
409.10

* In-Kind: Travel - Lodging

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).....

1221.78

1221.78

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 88
	<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	

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

NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Brendan Boyle

Mailing Address 15040 Kelvin Ave.

City Philadelphia State PA Zip Code 19116

FEC ID number of contributing federal political committee. **C H4PA13199**

Name of Employer U.S. House of Representatives Occupation Congressman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1276.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 13 / 2015

Transaction ID : C10588648

Amount of Each Receipt this Period
13.18

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).....

13.18

13.18

**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 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 1516 Second Ave		Amount of Each Disbursement this Period 189.00 Transaction ID : D529344
City Seattle	State WA	
Zip Code 98101	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00 Transaction ID : D529855
City Washington	State DC	
Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00 Transaction ID : D529856
City Washington	State DC	
Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8689.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 88			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 1000.00 Transaction ID : D529857
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Accounting Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 25.00 Transaction ID : D529858
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 16.57 Transaction ID : D529859
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1041.57
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 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 111.63 Transaction ID : D529860
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser - Catering	
Candidate Name	Category/Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 68.39 Transaction ID : D529861
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Food and Meals	
Candidate Name	Category/Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 39.35 Transaction ID : D529862
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising - Catering	
Candidate Name	Category/Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	219.37
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 56 OF 88			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 9.45 Transaction ID : D529863
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Postage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00 Transaction ID : D529864
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00 Transaction ID : D529865
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	8509.45
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 57 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 991.67 Transaction ID : D529866
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 1000.00 Transaction ID : D529867
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Accounting Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 500.00 Transaction ID : D529868
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Compliance Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2491.67
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 58 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 500.00 Transaction ID : D529869
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Compliance Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00 Transaction ID : D529870
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00 Transaction ID : D529871
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 1000.00 Transaction ID : D529872
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Accounting Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 25.00 Transaction ID : D529873
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Telephone	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 230.00 Transaction ID : D529874
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser - Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 26.00
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : D529875
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 1415.00
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser - Venue	
Candidate Name	Category/Type	Transaction ID : D529876
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 96.71
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser - Catering	
Candidate Name	Category/Type	Transaction ID : D529877
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1537.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 88	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 8.74
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraiser - Catering	
Candidate Name	Category/Type	Transaction ID : D529878
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 22.72
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : D529879
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	
Candidate Name	Category/Type	Transaction ID : D529880
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4281.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4250.00 Transaction ID : D529881
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Fundraising Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 1000.00 Transaction ID : D529882
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Accounting Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 25.00 Transaction ID : D529883
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Telephone	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5275.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015		
Mailing Address 499 S Capitol St SW Ste 422			Amount of Each Disbursement this Period 58.34		
City Washington	State DC	Zip Code 20003-4028	Transaction ID : D529884		
Purpose of Disbursement Automobile Expense		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015		
Mailing Address 499 S Capitol St SW Ste 422			Amount of Each Disbursement this Period 7.95		
City Washington	State DC	Zip Code 20003-4028	Transaction ID : D529885		
Purpose of Disbursement Food and Meals		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015		
Mailing Address 499 S Capitol St SW Ste 422			Amount of Each Disbursement this Period 8.98		
City Washington	State DC	Zip Code 20003-4028	Transaction ID : D529886		
Purpose of Disbursement Food and Meals		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	75.27
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 315.36 Transaction ID : D529887
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 228.00 Transaction ID : D529888
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Lodging	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 75.00 Transaction ID : D529889
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Food and Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	315.36
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 65 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. James Beck		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2015
Mailing Address 139 New Brooklyn		Amount of Each Disbursement this Period 1875.18 Transaction ID : D529377
City Sicklerville	State NJ Zip Code 08081	
Purpose of Disbursement IT Services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Rep Brendan Boyle		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 15040 Kelvin Ave.		Amount of Each Disbursement this Period 50.12 Transaction ID : D528631
City Philadelphia	State PA Zip Code 19116	
Purpose of Disbursement Automobile Expense	Category/Type	
Candidate Name Rep Brendan Boyle		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 13		

Full Name (Last, First, Middle Initial) c. Rep Brendan Boyle		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2015
Mailing Address 15040 Kelvin Ave.		Amount of Each Disbursement this Period 76.90 Transaction ID : D529840
City Philadelphia	State PA Zip Code 19116	
Purpose of Disbursement Food and Meals	Category/Type	
Candidate Name Rep Brendan Boyle		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 13		

SUBTOTAL of Disbursements This Page (optional).....	2002.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 88		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Rep Brendan Boyle		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2015
Mailing Address 15040 Kelvin Ave.		Amount of Each Disbursement this Period 812.68 Transaction ID : D530450
City Philadelphia	State PA Zip Code 19116	
Purpose of Disbursement Travel - Air Fare		* In-Kind Received
Candidate Name Rep Brendan Boyle		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2016	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: PA District: 13		

Full Name (Last, First, Middle Initial) B. Rep Brendan Boyle		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2015
Mailing Address 15040 Kelvin Ave.		Amount of Each Disbursement this Period 409.10 Transaction ID : D530451
City Philadelphia	State PA Zip Code 19116	
Purpose of Disbursement Travel - Lodging		* In-Kind Received
Candidate Name Rep Brendan Boyle		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2016	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: PA District: 13		

Full Name (Last, First, Middle Initial) c. Comcast		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address PO Box 3002		Amount of Each Disbursement this Period 83.68 Transaction ID : D529824
City Southeastern	State PA Zip Code 19398	
Purpose of Disbursement Internet Service		* In-Kind Received
Candidate Name		
Office Sought: <input type="checkbox"/> House	Disbursement For: 2016	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1305.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address PO Box 3002		Amount of Each Disbursement this Period 83.68
City Southeastern	State PA	
Zip Code 19398	Purpose of Disbursement Internet Service	Transaction ID : D529374
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2015
Mailing Address PO Box 3002		Amount of Each Disbursement this Period 83.68
City Southeastern	State PA	
Zip Code 19398	Purpose of Disbursement Internet Service	Transaction ID : D528639
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. COSI		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 700 11th St NW		Amount of Each Disbursement this Period 241.60
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Fundraiser - Catering	Transaction ID : D528630
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	408.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. David L. Andrukitis, Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2015		
Mailing Address 8325 Old Marlboro Pike, A-13			Amount of Each Disbursement this Period 370.45		
City Upper Marlboro	State MD	Zip Code 20772	Transaction ID : D529360		
Purpose of Disbursement Printing		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. E-Z Pass			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015		
Mailing Address 7631 Derry Street			Amount of Each Disbursement this Period 70.00		
City Harrisburg	State PA	Zip Code 17111	Transaction ID : D528634		
Purpose of Disbursement Automobile Expense		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. E-Z Pass			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015		
Mailing Address 7631 Derry Street			Amount of Each Disbursement this Period 70.00		
City Harrisburg	State PA	Zip Code 17111	Transaction ID : D529336		
Purpose of Disbursement Automobile Expense		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	510.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. E-Z Pass		Date of Disbursement
Mailing Address 7631 Derry Street		M M / D D / Y Y Y Y 09 / 08 / 2015
City	State	Zip Code
Harrisburg	PA	17111
Purpose of Disbursement Automobile Expense		Amount of Each Disbursement this Period
Candidate Name	Category/ Type	70.00
Office Sought:	Disbursement For: 2016	Transaction ID : D529800
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. E-Z Pass		Date of Disbursement
Mailing Address 7631 Derry Street		M M / D D / Y Y Y Y 09 / 28 / 2015
City	State	Zip Code
Harrisburg	PA	17111
Purpose of Disbursement Automobile Expense		Amount of Each Disbursement this Period
Candidate Name	Category/ Type	70.00
Office Sought:	Disbursement For: 2016	Transaction ID : D529801
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. E-Z Pass		Date of Disbursement
Mailing Address 7631 Derry Street		M M / D D / Y Y Y Y 09 / 15 / 2015
City	State	Zip Code
Harrisburg	PA	17111
Purpose of Disbursement Automobile Expense		Amount of Each Disbursement this Period
Candidate Name	Category/ Type	70.00
Office Sought:	Disbursement For: 2016	Transaction ID : D529802
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 88			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Esurance		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address P.O. Box 6476		Amount of Each Disbursement this Period 1152.00
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Automobile Insurance	Transaction ID : D528626
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FirstData		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 4.90
City Atlanta	State GA	
Zip Code 30342-1651	Purpose of Disbursement Bank Fee	Transaction ID : D528603
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. FirstData		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 60.66
City Atlanta	State GA	
Zip Code 30342-1651	Purpose of Disbursement Bank Fee	Transaction ID : D528604
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1217.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. FirstData		M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Bank Fee	Category/Type	
Candidate Name	Transaction ID : D528605	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. FirstData		M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Transaction ID : D529339	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. FirstData		M M / D D / Y Y Y Y 09 / 02 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Transaction ID : D529813	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	889.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 88			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address PO Box 542000		Amount of Each Disbursement this Period 569.00
City Omaha	State NE	
Zip Code 68154-8000	Purpose of Disbursement Automobile Lease	Transaction ID : D529809
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2015
Mailing Address PO Box 542000		Amount of Each Disbursement this Period 569.00
City Omaha	State NE	
Zip Code 68154-8000	Purpose of Disbursement Automobile Lease	Transaction ID : D529368
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address PO Box 542000		Amount of Each Disbursement this Period 569.00
City Omaha	State NE	
Zip Code 68154-8000	Purpose of Disbursement Automobile Lease	Transaction ID : D528629
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Independence Communications & Campaigns LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 10 Canal Street Suite 228		Amount of Each Disbursement this Period 5153.00 Transaction ID : D529369
City Bristol	State PA Zip Code 19007	
Purpose of Disbursement Polling	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ms. Niki A. Iskarpayoti		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2015
Mailing Address 144 Allens Lane C32		Amount of Each Disbursement this Period 355.41 Transaction ID : D529367
City Philadelphia	State PA Zip Code 19119	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Ms. Niki A. Iskarpayoti		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 144 Allens Lane C32		Amount of Each Disbursement this Period 472.51 Transaction ID : D529379
City Philadelphia	State PA Zip Code 19119	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5980.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Ms. Niki A. Iskarpayoti		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address 144 Allens Lane C32		Amount of Each Disbursement this Period 355.42 Transaction ID : D529343
City Philadelphia	State PA Zip Code 19119	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ms. Niki A. Iskarpayoti		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2015
Mailing Address 144 Allens Lane C32		Amount of Each Disbursement this Period 355.42 Transaction ID : D528620
City Philadelphia	State PA Zip Code 19119	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Meadowlands Country Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 711 Boehms Church Road		Amount of Each Disbursement this Period 2007.00 Transaction ID : D528632
City Blue Bell	State PA Zip Code 19422	
Purpose of Disbursement Fundraiser - Venue	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2717.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 88			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Meadowlands Country Club			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 711 Boehms Church Road			Amount of Each Disbursement this Period 500.00 Transaction ID : D528601
City Blue Bell	State PA	Zip Code 19422	
Purpose of Disbursement Event Deposit		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Montgomery McCracken Walker & Rhoads LLP			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2015
Mailing Address 123 South Broad St 24th Floor			Amount of Each Disbursement this Period 238.00 Transaction ID : D529362
City Philadelphia	State PA	Zip Code 19109-1099	
Purpose of Disbursement Legal Fees		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. NGP VAN Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address 1101 15th St. NW			Amount of Each Disbursement this Period 700.00 Transaction ID : D529337
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Software		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1438.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. NGP VAN Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015		
Mailing Address 1101 15th St. NW			Amount of Each Disbursement this Period 150.00		
City Washington	State DC	Zip Code 20005	Transaction ID : D528602		
Purpose of Disbursement Software		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. NGP VAN Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015		
Mailing Address 1101 15th St. NW			Amount of Each Disbursement this Period 700.00		
City Washington	State DC	Zip Code 20005	Transaction ID : D528598		
Purpose of Disbursement Software		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. NGP VAN Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015		
Mailing Address 1101 15th St. NW			Amount of Each Disbursement this Period 700.00		
City Washington	State DC	Zip Code 20005	Transaction ID : D529827		
Purpose of Disbursement Software		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. O'Brien Printing			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 324 Dorrance St			Amount of Each Disbursement this Period 391.14 Transaction ID : D528646
City Bristol	State PA	Zip Code 19007	
Purpose of Disbursement Printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Office Depot			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 6600 N Military Trail			Amount of Each Disbursement this Period 39.32 Transaction ID : D528619
City Boca Raton	State FL	Zip Code 33496	
Purpose of Disbursement Office Supplies		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Office Depot			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 6600 N Military Trail			Amount of Each Disbursement this Period 18.52 Transaction ID : D529372
City Boca Raton	State FL	Zip Code 33496	
Purpose of Disbursement Office Supplies		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	448.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 88			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 76.67
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll Expenses		Category/ Type	Transaction ID : D529895
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 61.25
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Salary Taxes		Category/ Type	Transaction ID : D529896
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 47.35
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : D529897
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	185.27
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 88			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 61.24
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Salary Taxes		Candidate Name	Transaction ID : D529898
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 47.35
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll Taxes		Candidate Name	Transaction ID : D529899
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) c. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 85.17
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll Expenses		Candidate Name	Transaction ID : D529900
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	193.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 61.24
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Salary Taxes		Candidate Name	Transaction ID : D529901
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 47.35
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll Taxes		Candidate Name	Transaction ID : D529902
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) c. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 126.67
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll Expenses		Candidate Name	Transaction ID : D529903
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	235.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 61.25 Transaction ID : D529904
City Rochester State NY Zip Code 14625-2311	Purpose of Disbursement Salary Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 47.35 Transaction ID : D529905
City Rochester State NY Zip Code 14625-2311	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 126.67 Transaction ID : D529906
City Rochester State NY Zip Code 14625-2311	Purpose of Disbursement Payroll Expenses	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	235.27
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 88			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 76.67
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll Expenses	Transaction ID : D529907
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 98.00
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Salary Taxes	Transaction ID : D529908
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 64.84
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll Taxes	Transaction ID : D529909
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	239.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 88			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Revere Suburban Realty Corp.		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 2350 Tremont St. Suite 10		Amount of Each Disbursement this Period 200.00 Transaction ID : D528649
City Philadelphia	State PA Zip Code 19115	
Purpose of Disbursement Campaign Office Rent	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Revere Suburban Realty Corp.		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 2350 Tremont St. Suite 10		Amount of Each Disbursement this Period 200.00 Transaction ID : D529381
City Philadelphia	State PA Zip Code 19115	
Purpose of Disbursement Campaign Office Rent	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Runyan Holdings LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 8 E St SE		Amount of Each Disbursement this Period 250.00 Transaction ID : D528633
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fundraiser - Venue	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 88			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 3000 Chestnut St		Amount of Each Disbursement this Period 8.75
City Philadelphia State PA Zip Code 19104-5003	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : D528599
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 3000 Chestnut St		Amount of Each Disbursement this Period 8.75
City Philadelphia State PA Zip Code 19104-5003	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : D529371
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address 3000 Chestnut St		Amount of Each Disbursement this Period 8.75
City Philadelphia State PA Zip Code 19104-5003	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : D529340
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	26.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 88		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2015
Mailing Address 3000 Chestnut St		Amount of Each Disbursement this Period 8.75
City Philadelphia	State PA Zip Code 19104-5003	
Purpose of Disbursement Postage	Category/Type	Transaction ID : D529376
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	8.75
TOTAL This Period (last page this line number only).....	64851.60

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 88			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Seth Bloom		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 2812 Landon Dr		Amount of Each Disbursement this Period 250.00
City Wilmington	State DE	
Zip Code 19810-2213	Purpose of Disbursement Partial Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	250.00

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

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

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

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Abington Township Joint Township Council

Full Name (Last, First, Middle Initial)
Mailing Address 1166 Old York Road

City Abington State PA Zip Code 19001

Purpose of Disbursement Donation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 11 / 2015

Amount of Each Disbursement this Period: 250.00

Transaction ID : D529370

B. Abington Township Police Department

Full Name (Last, First, Middle Initial)
Mailing Address 1166 Old York Rd

City Abington State PA Zip Code 19001

Purpose of Disbursement Charitable Donation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 27 / 2015

Amount of Each Disbursement this Period: 250.00

Transaction ID : D529843

c. Sean Kilkenny for Sheriff

Full Name (Last, First, Middle Initial)
Mailing Address 715 Washington Lane

City Jenkintown State PA Zip Code 19046

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 18 / 2015

Amount of Each Disbursement this Period: 1000.00

Transaction ID : D529812

SUBTOTAL of Disbursements This Page (optional) 1500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 88 OF 88	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Upper Moreland Soccer Club		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2015
Mailing Address PO Box 85		Amount of Each Disbursement this Period 250.00
City Willow Grove	State PA Zip Code 19090	
Purpose of Disbursement Donation	Candidate Name	Transaction ID : D529382
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

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

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

SUBTOTAL of Disbursements This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	1750.00