

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

Richard Hanna for Congress Committee

ADDRESS (number and street) PO Box 118

Check if different than previously reported. (ACC)

Utica

NY

13503-0118

2. FEC IDENTIFICATION NUMBER

C C00451005

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

NY

24

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)

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

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on MM/DD/YYYY in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period

MM/DD/YYYY through MM/DD/YYYY 07/01/2014 through 09/30/2014

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 Jennifer Battista

Signature of Treasurer Jennifer Battista

[Electronically Filed]

Date

MM/DD/YYYY 10/23/2014

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

Table with 8 columns and 1 row for Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Richard Hanna for Congress Committee**

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))....	82880.49	979857.6
(b) Total Contribution Refunds (from Line 20(d)) .....	1250	1500
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	81630.49	978357.6
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	112072.81	893070.4
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	7813.9
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	112072.81	885256.5
8. Cash on Hand at Close of Reporting Period (from Line 27).....	71409.74	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	194000	

**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

**Richard Hanna for Congress Committee**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5350	353702.83
(ii) Unitemized.....	310	60262.06
(iii) TOTAL of contributions from individuals ▶	5660	413964.89
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	77220.49	565892.71
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	82880.49	979857.6
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	1363.48
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0	295000
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	295000
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	7813.9
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	4.85	155.26
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	82885.34	1284190.24

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	112072.81	893070.4
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	350000	630000
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	350000	630000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	250	500
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	1000	1000
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1250	1500
21. OTHER DISBURSEMENTS .....	5300	12020
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	468622.81	1536590.4

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	457147.21
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	82885.34
25. SUBTOTAL (add Line 23 and Line 24).....	540032.55
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	468622.81
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	71409.74

**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 5 OF 116
	<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)  
**Richard Hanna for Congress Committee**

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

Mailing Address 410 Park Avenue  
Floor 16

City State Zip Code  
New York NY 10022-4407

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

Name of Employer Occupation  
CL King & Associates Managing Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4750**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 04 / 2014

**Transaction ID : A-CF9538**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 138 Paradise Lane

City State Zip Code  
Oriskany NY 13424-3737

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

Name of Employer Occupation  
Fred Burrows Trucking Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : A-CF9552**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 501 Main Street

City State Zip Code  
Utica NY 13501-1245

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

Name of Employer Occupation  
Pacemaker Steel & Piping Co. Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : A-CF9558**

Amount of Each Receipt this Period  
**250**

**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 6 OF 116
	<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)  
**Richard Hanna for Congress Committee**

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

Mailing Address 721 Monforte Drive

City State Zip Code  
Endicott NY 13760-2181

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1100**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 08 / 2014**

**Transaction ID : A-CF9597**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**W. Keyes Hill-Edgar**

Mailing Address 1515 Broadway

City State Zip Code  
New York NY 10036-8901

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

Name of Employer Occupation Information Requested  
Viacom Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2014**

**Transaction ID : A-CF9602**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 1916 Black River Boulevard

City State Zip Code  
Rome NY 13440

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**0**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : A-CF9629**

Amount of Each Receipt this Period  
**250**

SEE REFUND 9/10/14

**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 7 OF 116
	<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)  
**Richard Hanna for Congress Committee**

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

Mailing Address 6402 Karlen Road

City State Zip Code  
Rome NY 13440-7452

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

Name of Employer Occupation  
Rome Strip Steel Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : A-CF9612**

Amount of Each Receipt this Period  
**100**

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

Mailing Address 234 Clinton Street

City State Zip Code  
Whitesboro NY 13492-2531

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : A-CF9647**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 2351 S Rolfe Street

City State Zip Code  
Arlington VA 22202-1544

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

Name of Employer Occupation  
Dominion Energy Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : A-CF9652**

Amount of Each Receipt this Period  
**250**

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

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

**850.00**

**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 116
	<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)  
**Richard Hanna for Congress Committee**

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

Mailing Address 150 Genesee Street  
Apt. B21

City State Zip Code  
New Hartford NY 13413-2223

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 22 / 2014**

**Transaction ID : A-CF9642**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 1511 22nd Street N

City State Zip Code  
Arlington VA 22209-1103

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : A-CF9676**

Amount of Each Receipt this Period  
**500**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**750.00**

**5350.00**



**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 116
	<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)  
**Richard Hanna for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Bloomin' Brands Inc. PAC**

Mailing Address 2202 North West Shore Boulevard

City Tampa State FL Zip Code 33607

FEC ID number of contributing federal political committee. **C** C00253153

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : A-CF9553**

Amount of Each Receipt this Period  
 2000  
 POSTMARKED PRIOR TO PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**Cheniere Energy, Inc. PAC**

Mailing Address 1155 21st Street NW Suite 300

City Washington State DC Zip Code 20036-3312

FEC ID number of contributing federal political committee. **C** C00430157

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : A-CF9556**

Amount of Each Receipt this Period  
 1000

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

Mailing Address 1501 K Street NW Suite 350

City Washington State DC Zip Code 20005-1412

FEC ID number of contributing federal political committee. **C** C00084491

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : A-CF9554**

Amount of Each Receipt this Period  
 1000

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A. Owner Operator Independent Drivers Association PAC (OIDA PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1000

City Grain Valley State MO Zip Code 64029-1000

FEC ID number of contributing federal political committee. **C** C00236778

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7500

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : A-CF9555**

Amount of Each Receipt this Period  
 2500

**B. ArchiPAC The American Institute of Architects**

Full Name (Last, First, Middle Initial)  
Mailing Address 1735 New York Avenue NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : A-CF9565**

Amount of Each Receipt this Period  
 1000

**C. Massachusetts Mutual Life Insurance Company PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1295 State Street

City Springfield State MA Zip Code 01111-0001

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : A-CF9564**

Amount of Each Receipt this Period  
 1000

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A. Republican Mainstreet Partnership PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1220 L Street NW  
Suite 100-263

City Washington State DC Zip Code 20005-4018

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 25 / 2014

**Transaction ID : A-CF9563**

Amount of Each Receipt this Period  
1000

**B. YOPAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1101 Walnut Street  
Unit 1101

City Kansas City State MO Zip Code 64106

FEC ID number of contributing federal political committee. **C** C00497305

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 25 / 2014

**Transaction ID : A-CF9566**

Amount of Each Receipt this Period  
1000

**C. American Bankers Association PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1120 Connecticut Avenue NW

City Washington State DC Zip Code 20036-3902

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 04 / 2014

**Transaction ID : A-CF9582**

Amount of Each Receipt this Period  
1000

**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 12 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Entergy Corporation Political Action Committee (ENPAC)**

Mailing Address 425 West Capitol Avenue  
Suite 24B

City Little Rock State AR Zip Code 72201-3405

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : A-CF9578**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Exxon Mobil Corporation PAC**

Mailing Address 5959 Las Colinas Boulevard

City Irving State TX Zip Code 75039-4202

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : A-CF9581**

Amount of Each Receipt this Period  
2500

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

Mailing Address PO Box 23219

City New Orleans State LA Zip Code 70183-0219

FEC ID number of contributing federal political committee. **C** C00394957

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : A-CF9579**

Amount of Each Receipt this Period  
2000

**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 13 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A. Full Name (Last, First, Middle Initial)**  
**The Eye Of The Tiger Political Action Committee**

Mailing Address **PO Box 2485**

City **Springfield** State **VA** Zip Code **22152-0485**

FEC ID number of contributing federal political committee. **C C00467431**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 04 / 2014**

**Transaction ID : A-CF9580**

Amount of Each Receipt this Period  
**500**

**B. Full Name (Last, First, Middle Initial)**  
**Lockheed Martin Employees PAC**

Mailing Address **PO Box 33010**

City **Lakeland** State **FL** Zip Code **33807-3010**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **8000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 09 / 2014**

**Transaction ID : A-CF9593**

Amount of Each Receipt this Period  
**1000**

**C. Full Name (Last, First, Middle Initial)**  
**Verizon Communications, Inc./ Verizon Wireless Good Government Club**

Mailing Address **1300 I Street NW  
Lower 4**

City **Washington** State **DC** Zip Code **20005-3314**

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 09 / 2014**

**Transaction ID : A-CF9594**

Amount of Each Receipt this Period  
**1000**

**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 14 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Action Committee for Rural Electrification ACRE**

Mailing Address 4301 Wilson Boulevard

City State Zip Code  
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C C00002972**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7500**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**08 22 2014**

**Transaction ID : A-CF9614**

Amount of Each Receipt this Period  
**2500**

**B.** Full Name (Last, First, Middle Initial)  
**International Union of Operating Engineers Political Education Committee (IUOE/EPEC)**

Mailing Address 1125 17th Street NW

City State Zip Code  
Washington DC 20036-4709

FEC ID number of contributing federal political committee. **C C00029504**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**08 22 2014**

**Transaction ID : A-CF9610**

Amount of Each Receipt this Period  
**5000**

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

Mailing Address PO Box 33010

City State Zip Code  
Lakeland FL 33807-3010

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8000**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**08 22 2014**

**Transaction ID : A-CF9611**

Amount of Each Receipt this Period  
**1000**

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

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

**8500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 116
	<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)  
**Richard Hanna for Congress Committee**

A. Full Name (Last, First, Middle Initial)  
**Political Educational Fund of the Building & Construction Trades Department**

Mailing Address **815 16th Street NW  
Suite 600**

City **Washington** State **DC** Zip Code **20006-4101**

FEC ID number of contributing federal political committee. **C C00003160**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : A-CF9607**

Amount of Each Receipt this Period  
**1000**

B. Full Name (Last, First, Middle Initial)  
**Professional Aviation Safety Specialists PAC**

Mailing Address **1150 17th Street NW  
Suite 702**

City **Washington** State **DC** Zip Code **20036-4614**

FEC ID number of contributing federal political committee. **C C00286807**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : A-CF9608**

Amount of Each Receipt this Period  
**1500**

C. Full Name (Last, First, Middle Initial)  
**The Boeing Company PAC**

Mailing Address **1200 Wilson Boulevard**

City **Arlington** State **VA** Zip Code **22209-2300**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **3000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : A-CF9613**

Amount of Each Receipt this Period  
**1000**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**The Iberdrola USA Political Action Committee**

Mailing Address 52 Farm View Drive

City State Zip Code  
New Gloucester ME 04260-5100

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2014

**Transaction ID : A-CF9605**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**United Technologies Corporation Political Action Committee**

Mailing Address 1101 Pennsylvania Avenue NW  
Floor 10

City State Zip Code  
Washington DC 20004-2566

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2014

**Transaction ID : A-CF9606**

Amount of Each Receipt this Period  
1500

**C.** Full Name (Last, First, Middle Initial)  
**Cummins Inc. PAC (CIPAC)**

Mailing Address 601 Pennsylvania Avenue NW  
Suite 1100 North

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00377952

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 13 / 2014

**Transaction ID : A-CF9635**

Amount of Each Receipt this Period  
500

**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 17 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A. Full Name (Last, First, Middle Initial)**  
**GOP GENERATION Y FUND**

Mailing Address PO Box 9055

City Peoria State IL Zip Code 61612-9055

FEC ID number of contributing federal political committee. **C C00448191**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2014

**Transaction ID : A-CF9636**

Amount of Each Receipt this Period  
5000

**B. Full Name (Last, First, Middle Initial)**  
**Int'l Dairy Farms Assn - Ice Cream Milk & Cheese PAC**

Mailing Address 1250 H Street NW  
Suite 900

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00128231**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2014

**Transaction ID : A-CF9634**

Amount of Each Receipt this Period  
1000

**C. Full Name (Last, First, Middle Initial)**  
**National Roofing Contractors Association Roof PAC**

Mailing Address 324 4th Street NE

City Washington State DC Zip Code 20002-5824

FEC ID number of contributing federal political committee. **C C00244863**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2014

**Transaction ID : A-CF9637**

Amount of Each Receipt this Period  
1000

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**BAE Systems USA PAC**

Mailing Address 1300 17th Street N

City State Zip Code  
Arlington VA 22209-3811

FEC ID number of contributing federal political committee. **C C00281212**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : A-CF9654**

Amount of Each Receipt this Period  
**2000**

**B.** Full Name (Last, First, Middle Initial)  
**MVP Health Care, Inc. Federal PAC**

Mailing Address 625 State Street

City State Zip Code  
Schenectady NY 12305-2111

FEC ID number of contributing federal political committee. **C C00431429**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : A-CF9648**

Amount of Each Receipt this Period  
**5000**

**C.** Full Name (Last, First, Middle Initial)  
**National Association of Health Underwriters PAC (NAHU PAC)**

Mailing Address 2000 14th Street N  
Suite 450

City State Zip Code  
Arlington VA 22201-2573

FEC ID number of contributing federal political committee. **C C00283135**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : A-CF9649**

Amount of Each Receipt this Period  
**2000**

**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: (check only one)	PAGE 19 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A. National Emergency Medicine PAC (NEM PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 619911

City Dallas State TX Zip Code 75261-9911

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : A-CF9651**

Amount of Each Receipt this Period  
 1000

**B. Republican Majority for Choice Federal PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1900 L Street NW Suite 320

City Washington State DC Zip Code 20036-5027

FEC ID number of contributing federal political committee. **C** C00346635

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5500

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : A-CF9650**

Amount of Each Receipt this Period  
 1000

**C. The Coca Cola Company Nonpartisan Cmtee for Good Gov't**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1734

City Atlanta State GA Zip Code 30301

FEC ID number of contributing federal political committee. **C** C00012468

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : A-CF9653**

Amount of Each Receipt this Period  
 1000

**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 20 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Wine and Spirits Wholesalers of America PAC**

Mailing Address 805 15th Street NW  
Suite 430

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00147173**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : A-CF9646**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Air Line Pilots Association International PAC**

Mailing Address 1625 Massachusetts Avenue NW

City Washington State DC Zip Code 20036-2212

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : A-CF9662**

Amount of Each Receipt this Period  
1500

**C.** Full Name (Last, First, Middle Initial)  
**CULAC The PAC of Credit Union National Association**

Mailing Address 601 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : A-CF9660**

Amount of Each Receipt this Period  
1000

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Human Rights Campaign PAC**

Mailing Address 1640 Rhode Island Avenue NW

City Washington State DC Zip Code 20036-3200

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6720.49

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : A-IF9690**

Amount of Each Receipt this Period  
720.49

Inkind: Online Advocacy and Fundraising

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

Mailing Address 100 West Walnut Street

City Pasadena State CA Zip Code 91124

FEC ID number of contributing federal political committee. **C** C00103549

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : A-CF9661**

Amount of Each Receipt this Period  
5000

**C.** Full Name (Last, First, Middle Initial)  
**American Council of Engineering Companies PAC (ACEC PAC)**

Mailing Address 1015 15th Street NW

City Washington State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C** C00491720

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF9674**

Amount of Each Receipt this Period  
2500

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

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

8220.49

**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 116
	<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)  
**Richard Hanna for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Delta Air Lines Political Action Committee**

Mailing Address 1212 New York Avenue NW  
Suite 200

City Washington State DC Zip Code 20005-6609

FEC ID number of contributing federal political committee. **C C00104802**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF9682**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**National Association of Realtors PAC (RPAC)**

Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF9678**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**National Stone, Sand & Gravel Association PAC (NSSGA RockPAC)**

Mailing Address 1605 King Street

City Alexandria State VA Zip Code 22314-2726

FEC ID number of contributing federal political committee. **C C00089458**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF9680**

Amount of Each Receipt this Period  
1000

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 116
	<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)  
**Richard Hanna for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**New York Life Insurance PAC**

Mailing Address 51 Madison Avenue  
Room 1109

City New York State NY Zip Code 10010-1603

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF9677**

Amount of Each Receipt this Period  
2500

**B.** Full Name (Last, First, Middle Initial)  
**The Wendy's Company Political Action Committee**

Mailing Address Box 75000 M

City Detroit State MI Zip Code 48275-0001

FEC ID number of contributing federal political committee. **C** C00369090

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF9675**

Amount of Each Receipt this Period  
2500

**C.** Full Name (Last, First, Middle Initial)  
**United Technologies Corporation Political Action Committee**

Mailing Address 1101 Pennsylvania Avenue NW  
Floor 10

City Washington State DC Zip Code 20004-2566

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF9679**

Amount of Each Receipt this Period  
1000

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

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

6000.00

7720.49

**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 24 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Catalyst Group RW, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 3297.7
City Washington	State DC	
Zip Code 20003-6300	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-9491</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Geppetto Catering</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 4505 Queensbury Road		Amount of Each Disbursement this Period 404.05
City Riverdale	State MD	
Zip Code 20737	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3108</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Catalyst Group RW, LLC(07/01/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Congressional Liquors</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 404 1st Street SE		Amount of Each Disbursement this Period 229.28
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Refreshments	<b>Transaction ID : B-S-3107</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Catalyst Group RW, LLC(07/01/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3297.70
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Congressional Liquors</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 404 1st Street SE		Amount of Each Disbursement this Period 26.39
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Refreshments	Transaction ID : B-S-3110
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Catalyst Group RW, LLC(07/01/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Congressional Liquors</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 404 1st Street SE		Amount of Each Disbursement this Period 43.98
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Refreshments	Transaction ID : B-S-3109
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Catalyst Group RW, LLC(07/01/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Catalyst Group RW, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 2000
City Washington	State DC	
Zip Code 20003-6300	Purpose of Disbursement Fundraising Consulting	Transaction ID : B-S-3105
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Catalyst Group RW, LLC(07/01/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 594
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Catering	Transaction ID : B-S-3106
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Catalyst Group RW, LLC(07/01/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Key Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 255 Genesee Street		Amount of Each Disbursement this Period 20
City Utica	State NY	
Zip Code 13501-3405	Purpose of Disbursement Banking Service Fee	Transaction ID : B-E-9500
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 4795 Commercial Drive		Amount of Each Disbursement this Period 10.42
City New Hartford	State NY	
Zip Code 13413-6211	Purpose of Disbursement General Office Supplies	Transaction ID : B-E-9501
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 1979.95 <b>Transaction ID : B-E-9503</b>
City Newark	State NJ Zip Code 07101-1270	
Purpose of Disbursement E-Merchant Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jamestown Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 5 Mapleton Road Suite 300		Amount of Each Disbursement this Period 19530 <b>Transaction ID : B-E-9541</b>
City Princeton	State NJ Zip Code 08540-9646	
Purpose of Disbursement Advertising	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Susan Gage Caterers</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 7411 Livingston Road		Amount of Each Disbursement this Period 242 <b>Transaction ID : B-E-9497</b>
City Oxon Hill	State MD Zip Code 20745	
Purpose of Disbursement Catering	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	19779.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. United Parcel Service</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 316 Pennsylvania Avenue SE Suite 300		Amount of Each Disbursement this Period 320 <b>Transaction ID : B-E-9498</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Facility Rental Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 3910 Oneida Street		Amount of Each Disbursement this Period 19.99 <b>Transaction ID : B-E-9502</b>
City Washington Mills State NY Zip Code 13413	Purpose of Disbursement Postage Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jennifer Battista</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 202 Bittern Court		Amount of Each Disbursement this Period 54.32 <b>Transaction ID : B-E-9494</b>
City New Hartford State NY Zip Code 13413-3516	Purpose of Disbursement MEMO DOES NOT REACH ITEMIZATION Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	394.31
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Emily J Lambe</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 5847 Cedar Avenue		Amount of Each Disbursement this Period 225.35
City Marcy State NY Zip Code 13403-2424	Purpose of Disbursement SEE MEMO ITEMS	
Candidate Name	002 Category/Type	Transaction ID : B-E-9496
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Original vendors exceeding reporting threshold itemized as memo transactions.		

Full Name (Last, First, Middle Initial) <b>B. Fastrac Markets</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 1706 Oriskany Street W		Amount of Each Disbursement this Period 40.05
City Utica State NY Zip Code 13502-2918	Purpose of Disbursement Fuel	
Candidate Name	002 Category/Type	Transaction ID : B-S-3122
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Subitemization of Emily Lambe(07/02/14)		

Full Name (Last, First, Middle Initial) <b>C. Fastrac Markets</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 1706 Oriskany Street W		Amount of Each Disbursement this Period 45
City Utica State NY Zip Code 13502-2918	Purpose of Disbursement Fuel	
Candidate Name	002 Category/Type	Transaction ID : B-S-3123
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Subitemization of Emily Lambe(07/02/14)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	225.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Jesse LaPadula</b>			Date of Disbursement MM / DD / YYYY 07 / 02 / 2014	
Mailing Address 290 Nowlan Road			Amount of Each Disbursement this Period 529.1	
City Binghamton	State NY	Zip Code 13904	Transaction ID : B-E-9543	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Jesse LaPadula</b>			Date of Disbursement MM / DD / YYYY 07 / 02 / 2014	
Mailing Address 290 Nowlan Road			Amount of Each Disbursement this Period 423.5	
City Binghamton	State NY	Zip Code 13904	Transaction ID : B-S-3182	
Purpose of Disbursement Wages		Category/ Type 001	[MEMO ITEM] Subitemization of Jesse LaPadula(07/02/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Jesse LaPadula</b>			Date of Disbursement MM / DD / YYYY 07 / 02 / 2014	
Mailing Address 290 Nowlan Road			Amount of Each Disbursement this Period 105.6	
City Binghamton	State NY	Zip Code 13904	Transaction ID : B-S-3183	
Purpose of Disbursement Reimbursed- Mileage		Category/ Type 002	[MEMO ITEM] Subitemization of Jesse LaPadula(07/02/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	529.10
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Carla Virgilio</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 1600 South Joyce Street Apartment 1612		Amount of Each Disbursement this Period 150 <b>Transaction ID : B-E-9495</b>
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement SEE MEMO ITEMS	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 4000 Easy Sky Harbor Boulevard		Amount of Each Disbursement this Period 50 <b>Transaction ID : B-S-3112</b>
City Pheonix	State AZ	
Zip Code 85034	Purpose of Disbursement Airline Fees	<b>[MEMO ITEM]</b> Subitemization of Carla Virgilio(07/02/14)
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. First Source Federal Credit Union</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 4451 Commerical Drive		Amount of Each Disbursement this Period 100 <b>Transaction ID : B-E-9518</b>
City New Hartford	State NY	
Zip Code 13413	Purpose of Disbursement Facility Rental	
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Hummels Office Plus</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 11 Hopper Street		Amount of Each Disbursement this Period 25.31
City Utica	State NY	
Zip Code 13501-3503	Purpose of Disbursement General Office Supplies	<b>Transaction ID : B-E-9516</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Daniel Brhel</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 220 North Roosevelt Avenue		Amount of Each Disbursement this Period 107.8
City Endicott	State NY	
Zip Code 13760	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-9526</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Daniel Brhel</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 220 North Roosevelt Avenue		Amount of Each Disbursement this Period 104.5
City Endicott	State NY	
Zip Code 13760	Purpose of Disbursement Wages	<b>Transaction ID : B-S-3143</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Daniel Brhel(07/07/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	133.11
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Daniel Brhel</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 220 North Roosevelt Avenue		Amount of Each Disbursement this Period 86.35
City Endicott	State NY Zip Code 13760	
Purpose of Disbursement Reimbursed- Mileage	Category/Type 002	<b>Transaction ID : B-S-3144</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Daniel Brhel(07/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Garth Curtis</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address St. Lawrence University SMC #1421 23 Romoda Drive		Amount of Each Disbursement this Period 86.35
City Canton	State NY Zip Code 13617	
Purpose of Disbursement SEE MEMO ITEM	Category/Type 002	<b>Transaction ID : B-E-9521</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Garth Curtis</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address St. Lawrence University SMC #1421 23 Romoda Drive		Amount of Each Disbursement this Period 86.35
City Canton	State NY Zip Code 13617	
Purpose of Disbursement Reimbursed- Mileage	Category/Type 002	<b>Transaction ID : B-S-3135</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Garth Curtis(07/07/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	86.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Michael Fandrich</b>			Date of Disbursement MM / DD / YYYY 07 / 07 / 2014	
Mailing Address 125 South Hoopes Avenue			Amount of Each Disbursement this Period 509.58	
City Auburn	State NY	Zip Code 13021	Transaction ID : B-E-9519	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Michael Fandrich</b>			Date of Disbursement MM / DD / YYYY 07 / 07 / 2014	
Mailing Address 125 South Hoopes Avenue			Amount of Each Disbursement this Period 300.03	
City Auburn	State NY	Zip Code 13021	Transaction ID : B-S-3153	
Purpose of Disbursement Reimbursed- Mileage		Category/ Type 002	[MEMO ITEM] Subitemization of Michael Fandrich(07/07/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Lost Dog Cafe</b>			Date of Disbursement MM / DD / YYYY 07 / 07 / 2014	
Mailing Address 222 Water Street			Amount of Each Disbursement this Period 44.14	
City Binghamton	State NY	Zip Code 13901	Transaction ID : B-S-3148	
Purpose of Disbursement Meal Expense		Category/ Type 001	[MEMO ITEM] Subitemization of Michael Fandrich(07/07/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	509.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Remlik's Fine Dining</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 31 Lewis Street		Amount of Each Disbursement this Period 402.00
City Binghamton State NY Zip Code 13901	Purpose of Disbursement Meal Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : B-S-3147</b> <b>[MEMO ITEM]</b> Subitemization of Michael Fandrich(07/07/14)

Full Name (Last, First, Middle Initial) <b>B. Renee M Gamela</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 508 Main Street		Amount of Each Disbursement this Period 27.75
City New York Mills State NY Zip Code 13417-1449	Purpose of Disbursement SEE MEMO ITEMS Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : B-E-9515</b> Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>c. Lotus Garden</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 399 Bleecker Street		Amount of Each Disbursement this Period 402.00
City Utica State NY Zip Code 13501	Purpose of Disbursement Meal Expense Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : B-S-3127</b> <b>[MEMO ITEM]</b> Subitemization of Renee Gamela(07/07/14)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	402.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Renee M Gamela</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 508 Main Street		Amount of Each Disbursement this Period 315.84
City New York Mills	State NY	
Zip Code 13417-1449	Purpose of Disbursement Reimbursed- Mileage	<b>Transaction ID : B-S-3132</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Renee Gamela(07/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mariel Heyboer</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 2626 Glenwood Road		Amount of Each Disbursement this Period 565.4
City Utica	State NY	
Zip Code 13501	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-9527</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mariel Heyboer</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 2626 Glenwood Road		Amount of Each Disbursement this Period 114.4
City Utica	State NY	
Zip Code 13501	Purpose of Disbursement Reimbursed- Mileage	<b>Transaction ID : B-S-3146</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Mariel Heyboer(07/07/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	565.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Mariel Heyboer</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 2626 Glenwood Road		Amount of Each Disbursement this Period 953.15 <b>Transaction ID : B-S-3145</b>
City Utica	State NY	
Purpose of Disbursement Wages	Zip Code 13501	[MEMO ITEM] Subitemization of Mariel Heyboer(07/07/14)
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Andrew Kahn</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 48 Eastwood Drive		Amount of Each Disbursement this Period 953.15 <b>Transaction ID : B-E-9520</b>
City Johnson City	State NY	
Purpose of Disbursement SEE MEMO ITEMS	Zip Code 13790	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Andrew Kahn</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 48 Eastwood Drive		Amount of Each Disbursement this Period 822.25 <b>Transaction ID : B-S-3133</b>
City Johnson City	State NY	
Purpose of Disbursement Wages	Zip Code 13790	[MEMO ITEM] Subitemization of Andrew Kahn(07/07/14)
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	953.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Andrew Kahn</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 48 Eastwood Drive		Amount of Each Disbursement this Period 654.5
City Johnson City	State NY Zip Code 13790	
Purpose of Disbursement Reimbursed- Mileage	Category/Type 002	<b>Transaction ID : B-S-3134</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Andrew Kahn(07/07/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Frank Lapertosa</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 18 Clarion Drive		Amount of Each Disbursement this Period 654.5
City Whitesboro	State NY Zip Code 13492	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	<b>Transaction ID : B-E-9522</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Frank Lapertosa</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 18 Clarion Drive		Amount of Each Disbursement this Period 511.5
City Whitesboro	State NY Zip Code 13492	
Purpose of Disbursement Wages	Category/Type 001	<b>Transaction ID : B-S-3136</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Frank Lapertosa(07/07/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	654.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Frank Lapertosa</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 18 Clarion Drive		Amount of Each Disbursement this Period 143
City Whitesboro State NY Zip Code 13492	Purpose of Disbursement Reimbursed- Mileage 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-3137  [MEMO ITEM] Subitemization of Frank Lapertosa(07/07/14)
State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Stephanie Leader</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 18 Harmony Lane		Amount of Each Disbursement this Period 822.25
City Binghamton State NY Zip Code 13901-5826	Purpose of Disbursement Reimbursed- Mileage 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-E-9525
State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Ryan Murphy</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 4825 Jenkins Road		Amount of Each Disbursement this Period 506
City Vernon State NY Zip Code 13476	Purpose of Disbursement SEE MEMO ITEMS 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-E-9524  Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1328.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Ryan Murphy</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 4825 Jenkins Road		Amount of Each Disbursement this Period 313.5
City Vernon	State NY	
Zip Code 13476	Purpose of Disbursement Wages	[MEMO ITEM] Subitemization of Ryan Murphy(07/07/14)
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ryan Murphy</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 4825 Jenkins Road		Amount of Each Disbursement this Period 192.5
City Vernon	State NY	
Zip Code 13476	Purpose of Disbursement Reimbursed- Mileage	[MEMO ITEM] Subitemization of Ryan Murphy(07/07/14)
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Nikki Schiebel</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 4830 Day Road		Amount of Each Disbursement this Period 352
City Vernon	State NY	
Zip Code 13476	Purpose of Disbursement SEE MEMO ITEMS	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	352.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Nikki Schiebel</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 4830 Day Road		Amount of Each Disbursement this Period 299.75
City Vernon	State NY	
Zip Code 13476	Purpose of Disbursement Wages	[MEMO ITEM] Subitemization of Nikki Schiebel(07/07/14)
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nikki Schiebel</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 4830 Day Road		Amount of Each Disbursement this Period 52.25
City Vernon	State NY	
Zip Code 13476	Purpose of Disbursement Reimbursed- Mileage	[MEMO ITEM] Subitemization of Nikki Schiebel(07/07/14)
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Justin Stokes</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 1593 Lucknow Road		Amount of Each Disbursement this Period 237.6
City Camden	State SC	
Zip Code 29020-8347	Purpose of Disbursement Reimbursed- Mileage	
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	237.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 116	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Jamestown Associates</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2014
Mailing Address 5 Mapleton Road Suite 300		Amount of Each Disbursement this Period 23454.4
City Princeton	State NJ	Zip Code 08540-9646
Purpose of Disbursement Advertising	Category/Type 004	
Candidate Name	Transaction ID : B-E-9530	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Patricia Vail Dellonte</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2014
Mailing Address 63 Mattie Street		Amount of Each Disbursement this Period 760.82
City Auburn	State NY	Zip Code 13021-4941
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 002	
Candidate Name	Transaction ID : B-E-9528	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.	

Full Name (Last, First, Middle Initial) <b>c. Patricia Vail Dellonte</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2014
Mailing Address 63 Mattie Street		Amount of Each Disbursement this Period 453
City Auburn	State NY	Zip Code 13021-4941
Purpose of Disbursement Reimbursed- Mileage	Category/Type 002	
Candidate Name	Transaction ID : B-S-3166	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Patricia Vail Dellonte(07/08/14)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	24215.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Remlik's Fine Dining</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2014
Mailing Address 31 Lewis Street		Amount of Each Disbursement this Period \$ 54.63
City Binghamton	State NY Zip Code 13901	
Purpose of Disbursement Meal Expense	Category/Type 002	<b>Transaction ID : B-S-3156</b>  <b>[MEMO ITEM]</b> Subitemization of Patricia Vail Dellonte(07/08/14)
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Lost Dog Cafe</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2014
Mailing Address 222 Water Street		Amount of Each Disbursement this Period \$ 44.15
City Binghamton	State NY Zip Code 13901	
Purpose of Disbursement Meal Expense	Category/Type 002	<b>Transaction ID : B-S-3158</b>  <b>[MEMO ITEM]</b> Subitemization of Patricia Vail Dellonte(07/08/14)
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Lost Dog Cafe</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2014
Mailing Address 222 Water Street		Amount of Each Disbursement this Period \$ 41.69
City Binghamton	State NY Zip Code 13901	
Purpose of Disbursement Meal Expense	Category/Type 002	<b>Transaction ID : B-S-3161</b>  <b>[MEMO ITEM]</b> Subitemization of Patricia Vail Dellonte(07/08/14)
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Hess</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 106 Port Watson Street		Amount of Each Disbursement this Period 2.21
City Cortland State NY Zip Code 13045-3156	Purpose of Disbursement Fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-3171  [MEMO ITEM] Subitemization of Robert Wagener(07/08/14)
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Nice N Easy Grocery Shoppes</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 501 Court Street		Amount of Each Disbursement this Period 4.32
City Utica State NY Zip Code 13502-4206	Purpose of Disbursement Meal Expense 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-3167  [MEMO ITEM] Subitemization of Robert Wagener(07/08/14)
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Renee M Gamela</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 508 Main Street		Amount of Each Disbursement this Period 86.59
City New York Mills State NY Zip Code 13417-1449	Purpose of Disbursement SEE MEMO ITEMS 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-E-9536  Original vendors exceeding reporting threshold itemized as memo transactions.
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	86.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Lotus Garden</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 399 Bleecker Street		Amount of Each Disbursement this Period 27.75
City Utica	State NY	
Zip Code 13501	Purpose of Disbursement Meal Expense	<b>Transaction ID : B-S-3175</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Renee Gamela(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Fandrich</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014
Mailing Address 125 South Hoopes Avenue		Amount of Each Disbursement this Period 382.77
City Auburn	State NY	
Zip Code 13021	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-9537</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. U-Haul</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014
Mailing Address 430 Lomond Place		Amount of Each Disbursement this Period 260.77
City Utica	State NY	
Zip Code 13502	Purpose of Disbursement Storage Fee	<b>Transaction ID : B-S-3180</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Michael Fandrich(07/10/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	382.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Capitol Promotions Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 249 N Keswick Avenue		Amount of Each Disbursement this Period 3,000.00 Transaction ID : B-E-9539
City Glenside	State PA	
Zip Code 19038-4803	Purpose of Disbursement Banners & Signs	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 1500 Broadway		Amount of Each Disbursement this Period 236.58 Transaction ID : B-E-9572
City Lubbock	State TX	
Zip Code 79401-3117	Purpose of Disbursement Banking Service Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Rome Conference Center, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 66 Geiger Road		Amount of Each Disbursement this Period 185.61 Transaction ID : B-E-9540
City Rome	State NY	
Zip Code 13441	Purpose of Disbursement Facility Rental	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3027.19
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 100 Pitcher Street		Amount of Each Disbursement this Period 5.6 <b>Transaction ID : B-E-9546</b>
City Utica	State NY	
Zip Code 13504-8900	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 12997.89 <b>Transaction ID : B-E-9542</b>
City Newark	State NJ	
Zip Code 07101-1270	Purpose of Disbursement SEE MEMO ITEMS	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. BJ's Wholesale Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 400 River Road		Amount of Each Disbursement this Period 307.62 <b>Transaction ID : B-S-3188</b>
City Utica	State NY	
Zip Code 13502	Purpose of Disbursement Food & Beverages	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13003.49
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. BJ's Wholesale Club</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 400 River Road		Amount of Each Disbursement this Period 205.83
City Utica	State NY	
Purpose of Disbursement Food & Beverages	Zip Code 13502	[MEMO ITEM] Subitemization of American Express(07/16/14)
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wal-Mart</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 4765 Commercial Drive		Amount of Each Disbursement this Period 25.39
City New Hartford	State NY	
Purpose of Disbursement Gifts & Mementos	Zip Code 13413-6211	[MEMO ITEM] Subitemization of American Express(07/16/14)
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 500 Seneca Street		Amount of Each Disbursement this Period 7.35
City Utica	State NY	
Purpose of Disbursement Postage	Zip Code 13502	[MEMO ITEM] Subitemization of American Express(07/16/14)
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 500 Seneca Street		Amount of Each Disbursement this Period 147
City Utica	State NY	
Zip Code 13502	Purpose of Disbursement Postage	<b>Transaction ID : B-S-3200</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 4000 Easy Sky Harbor Boulevard		Amount of Each Disbursement this Period 315.5
City Pheonix	State AZ	
Zip Code 85034	Purpose of Disbursement Airfare	<b>Transaction ID : B-S-3185</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. US Airways</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 4000 Easy Sky Harbor Boulevard		Amount of Each Disbursement this Period 320
City Pheonix	State AZ	
Zip Code 85034	Purpose of Disbursement Airfare	<b>Transaction ID : B-S-3184</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Tracfone</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 9700 NW 112th Avenue		Amount of Each Disbursement this Period 86.75
City Miami	State FL	
Purpose of Disbursement Cellular Phone Service	Zip Code 33178	[MEMO ITEM] Subitemization of American Express(07/16/14)
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Arena's Eis House Restaurant</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 144 County Route 16		Amount of Each Disbursement this Period 810
City Mexico	State NY	
Purpose of Disbursement Catering	Zip Code 13114	[MEMO ITEM] Subitemization of American Express(07/16/14)
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 400
City Washington	State DC	
Purpose of Disbursement Catering	Zip Code 20003-1801	[MEMO ITEM] Subitemization of American Express(07/16/14)
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Radisson Hotel</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 200 Genesee Street		Amount of Each Disbursement this Period 390.2
City Utica	State NY	
Zip Code 13501	Purpose of Disbursement Lodging	Transaction ID : B-S-3232
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Radisson Hotel</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 200 Genesee Street		Amount of Each Disbursement this Period 97.88
City Utica	State NY	
Zip Code 13501	Purpose of Disbursement Lodging	Transaction ID : B-S-3234
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 4795 Commercial Drive		Amount of Each Disbursement this Period 43.18
City New Hartford	State NY	
Zip Code 13413-6211	Purpose of Disbursement General Office Supplies	Transaction ID : B-S-3205
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(07/16/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

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

Mailing Address 4795 Commercial Drive

City New Hartford State NY Zip Code 13413-6211

Purpose of Disbursement  
General Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
07 / 16 / 2014

Amount of Each Disbursement this Period  
185.87

Transaction ID : B-S-3236

**[MEMO ITEM]**  
Subitemization of American Express(07/16/14)

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

Mailing Address 4765 Commercial Drive

City New Hartford State NY Zip Code 13413-6211

Purpose of Disbursement  
General Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
07 / 16 / 2014

Amount of Each Disbursement this Period  
542.05

Transaction ID : B-S-3212

**[MEMO ITEM]**  
Subitemization of American Express(07/16/14)

Full Name (Last, First, Middle Initial)  
**c. Wal-Mart**

Mailing Address 4765 Commercial Drive

City New Hartford State NY Zip Code 13413-6211

Purpose of Disbursement  
Gifts & Mementos

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
07 / 16 / 2014

Amount of Each Disbursement this Period  
69.56

Transaction ID : B-S-3233

**[MEMO ITEM]**  
Subitemization of American Express(07/16/14)

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Wal-Mart</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 4765 Commercial Drive		Amount of Each Disbursement this Period \$ 55.34
City New Hartford	State NY	
Zip Code 13413-6211	Purpose of Disbursement General Office Supplies	Transaction ID : B-S-3237
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wal-Mart</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 4765 Commercial Drive		Amount of Each Disbursement this Period \$ 32.14
City New Hartford	State NY	
Zip Code 13413-6211	Purpose of Disbursement Gifts & Mementos	Transaction ID : B-S-3202
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Victorystore.com</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 5200 30th Street SW		Amount of Each Disbursement this Period \$ 248.25
City Davenport	State IA	
Zip Code 52802-3039	Purpose of Disbursement Printing	Transaction ID : B-S-3221
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(07/16/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Wal-Mart</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 4765 Commercial Drive		Amount of Each Disbursement this Period 95.17
City New Hartford	State NY	
Zip Code 13413-6211	Purpose of Disbursement Gifts & Mementos	<b>Transaction ID : B-S-3190</b>
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wal-Mart</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 4765 Commercial Drive		Amount of Each Disbursement this Period 161.8
City New Hartford	State NY	
Zip Code 13413-6211	Purpose of Disbursement General Office Supplies	<b>Transaction ID : B-S-3206</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Wal-Mart</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 4765 Commercial Drive		Amount of Each Disbursement this Period 14.14
City New Hartford	State NY	
Zip Code 13413-6211	Purpose of Disbursement General Office Supplies	<b>Transaction ID : B-S-3213</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Wal-Mart</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 4765 Commercial Drive		Amount of Each Disbursement this Period 86.48
City New Hartford	State NY	
Zip Code 13413-6211	Purpose of Disbursement General Office Supplies	Transaction ID : B-S-3223
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 500 Seneca Street		Amount of Each Disbursement this Period 5.6
City Utica	State NY	
Zip Code 13502	Purpose of Disbursement Postage	Transaction ID : B-S-3217
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mail Chimp</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 512 Means Street NW Suite 404		Amount of Each Disbursement this Period 30
City Atlanta	State GA	
Zip Code 30318-5788	Purpose of Disbursement Software Service	Transaction ID : B-S-3224
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(07/16/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 500 Seneca Street		Amount of Each Disbursement this Period 17.45
City Utica	State NY	
Zip Code 13502	Purpose of Disbursement Postage	<b>Transaction ID : B-S-3218</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 500 Seneca Street		Amount of Each Disbursement this Period 343
City Utica	State NY	
Zip Code 13502	Purpose of Disbursement Postage	<b>Transaction ID : B-S-3228</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lost Dog Cafe</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 222 Water Street		Amount of Each Disbursement this Period 117.79
City Binghamton	State NY	
Zip Code 13901	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3197</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 3108 Vestal Parkway East		Amount of Each Disbursement this Period 86.75
City Vestal State NY Zip Code 13850	Purpose of Disbursement Computer Equipment Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : B-S-3187</b> <b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 3108 Vestal Parkway East		Amount of Each Disbursement this Period 32.4
City Vestal State NY Zip Code 13850	Purpose of Disbursement Cellular Phone Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : B-S-3209</b> <b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 752.21
City Menlo Park State CA Zip Code 94025	Purpose of Disbursement Advertising Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : B-S-3220</b> <b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Google</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 500
City Mountain View	State CA Zip Code 94043	
Purpose of Disbursement Advertising	Category/Type 004	<b>Transaction ID : B-S-3211</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 667.17
City Menlo Park	State CA Zip Code 94025	
Purpose of Disbursement Advertising	Category/Type 004	<b>Transaction ID : B-S-3196</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 1
City Menlo Park	State CA Zip Code 94025	
Purpose of Disbursement Advertising	Category/Type 004	<b>Transaction ID : B-S-3225</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 392.42
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Advertising	<b>Transaction ID : B-S-3241</b>
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 751.36
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Advertising	<b>Transaction ID : B-S-3229</b>
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DoubleTree Hotel Syracuse</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 6301 New York 298		Amount of Each Disbursement this Period 194.37
City East Syracuse	State NY	
Zip Code 13057	Purpose of Disbursement Lodging	<b>Transaction ID : B-S-3214</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 757.31
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Advertising	<b>Transaction ID : B-S-3191</b>
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 578.06
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Advertising	<b>Transaction ID : B-S-3203</b>
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DoubleTree Hotel Syracuse</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 6301 New York 298		Amount of Each Disbursement this Period 168.9
City East Syracuse	State NY	
Zip Code 13057	Purpose of Disbursement Lodging	<b>Transaction ID : B-S-3201</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. DoubleTree Hotel Syracuse</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 6301 New York 298		Amount of Each Disbursement this Period 319.54
City East Syracuse	State NY	
Zip Code 13057	Purpose of Disbursement Lodging	<b>Transaction ID : B-S-3207</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DoubleTree Hotel Syracuse</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 6301 New York 298		Amount of Each Disbursement this Period 300.74
City East Syracuse	State NY	
Zip Code 13057	Purpose of Disbursement Lodging	<b>Transaction ID : B-S-3238</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. DoubleTree Hotel Syracuse</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 6301 New York 298		Amount of Each Disbursement this Period 445.71
City East Syracuse	State NY	
Zip Code 13057	Purpose of Disbursement Lodging	<b>Transaction ID : B-S-3242</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Tracfone</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 9700 NW 112th Avenue		Amount of Each Disbursement this Period 86.75
City Miami	State FL	
Purpose of Disbursement Cellular Phone Service		[MEMO ITEM] Subitemization of American Express(07/16/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Tracfone</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 9700 NW 112th Avenue		Amount of Each Disbursement this Period 173.5
City Miami	State FL	
Purpose of Disbursement Cellular Phone Service		[MEMO ITEM] Subitemization of American Express(07/16/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Tracfone</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 9700 NW 112th Avenue		Amount of Each Disbursement this Period 86.75
City Miami	State FL	
Purpose of Disbursement Cellular Phone Service		[MEMO ITEM] Subitemization of American Express(07/16/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Tracfone</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 9700 NW 112th Avenue		Amount of Each Disbursement this Period 173.5
City Miami	State FL Zip Code 33178	
Purpose of Disbursement Cellular Phone Service	Category/Type 001	<b>Transaction ID : B-S-3226</b>  <b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DoubleTree Hotel Syracuse</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 6301 New York 298		Amount of Each Disbursement this Period 336.74
City East Syracuse	State NY Zip Code 13057	
Purpose of Disbursement Lodging	Category/Type 002	<b>Transaction ID : B-S-3192</b>  <b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Fred's Inn</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 5149 State Highway 12		Amount of Each Disbursement this Period 335
City Norwich	State NY Zip Code 13815	
Purpose of Disbursement Lodging	Category/Type 002	<b>Transaction ID : B-S-3195</b>  <b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Spressos Coffee House</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 160 Brooks Road		Amount of Each Disbursement this Period \$ 187.42
City Rome	State NY	
Zip Code 13441	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3215</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Larissa Cristallo</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 1417 Buckley Road		Amount of Each Disbursement this Period \$ 45.5
City Utica	State NY	
Zip Code 13501	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-9544</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Larissa Cristallo</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 1417 Buckley Road		Amount of Each Disbursement this Period \$ 31.75
City Utica	State NY	
Zip Code 13501	Purpose of Disbursement Wages	<b>Transaction ID : B-S-3245</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Larissa Cristallo(07/16/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ 45.50
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Larissa Cristallo</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 1417 Buckley Road		Amount of Each Disbursement this Period 13.75
City Utica	State NY	
Zip Code 13501	Purpose of Disbursement Reimbursed- Mileage	<b>Transaction ID : B-S-3244</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Larissa Cristallo(07/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Garth Curtis</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address St. Lawrence University SMC #1421 23 Romoda Drive		Amount of Each Disbursement this Period 26.4
City Canton	State NY	
Zip Code 13617	Purpose of Disbursement Reimbursed- Mileage	<b>Transaction ID : B-E-9545</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Northland Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 9560 Main Street		Amount of Each Disbursement this Period 87.67
City Holland Patent	State NY	
Zip Code 13354-3819	Purpose of Disbursement Utilities	<b>Transaction ID : B-E-9548</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	114.07
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. The Pennysaver</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address PO Box 111		Amount of Each Disbursement this Period 508.8 <b>Transaction ID : B-E-9549</b>
City Norwich	State NY	
Zip Code 13815	Purpose of Disbursement Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address PO Box 408		Amount of Each Disbursement this Period 100.16 <b>Transaction ID : B-E-9550</b>
City Newark	State NJ	
Zip Code 07101-0408	Purpose of Disbursement Cellular Phone Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. First Rehabilitation Life Insurance Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 220727		Amount of Each Disbursement this Period 125 <b>Transaction ID : B-E-9551</b>
City Great Neck	State NY	
Zip Code 11022-0727	Purpose of Disbursement Insurance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	733.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 2575.8
City Bethesda	State MD	Zip Code 20824-0844
Purpose of Disbursement Compliance Consulting	Category/ Type 001	
Candidate Name	Transaction ID : B-E-9574	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 500 Seneca Street		Amount of Each Disbursement this Period 98
City Utica	State NY	Zip Code 13502
Purpose of Disbursement Postage	Category/ Type 001	
Candidate Name	Transaction ID : B-S-3285	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/23/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 53.7
City Pittsburgh	State PA	Zip Code 15250-7461
Purpose of Disbursement Express Shipping	Category/ Type 001	
Candidate Name	Transaction ID : B-S-3283	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/23/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2575.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 1500
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement Compliance Consulting	Transaction ID : B-S-3281
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Campaign Financial Services(07/23/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 73.5
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement Printing	Transaction ID : B-S-3284
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Campaign Financial Services(07/23/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 840.6
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement E-Merchant Fees	Transaction ID : B-S-3286
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Campaign Financial Services(07/23/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. 1 Hopper Street, LLC</b>			Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 1 Hopper Street			Amount of Each Disbursement this Period 150 <b>Transaction ID : B-E-9559</b>
City Utica	State NY	Zip Code 13501-3508	
Purpose of Disbursement Rent		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. American Express</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address PO Box 1270			Amount of Each Disbursement this Period 10989.55 <b>Transaction ID : B-E-9562</b>
City Newark	State NJ	Zip Code 07101-1270	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Wal-Mart</b>			Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 4765 Commercial Drive			Amount of Each Disbursement this Period 11.93 <b>Transaction ID : B-S-3247</b>
City New Hartford	State NY	Zip Code 13413-6211	
Purpose of Disbursement General Office Supplies		Category/ Type 001	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11139.55
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Radisson Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 200 Genesee Street		Amount of Each Disbursement this Period 192.01
City Utica	State NY	
Zip Code 13501		[MEMO ITEM] Subitemization of American Express(07/28/14)
Purpose of Disbursement Lodging		
Candidate Name		
Office Sought:	House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Radisson Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 200 Genesee Street		Amount of Each Disbursement this Period 14.23
City Utica	State NY	
Zip Code 13501		[MEMO ITEM] Subitemization of American Express(07/28/14)
Purpose of Disbursement Meal Expense		
Candidate Name		
Office Sought:	House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Radisson Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 200 Genesee Street		Amount of Each Disbursement this Period 2144.05
City Utica	State NY	
Zip Code 13501		[MEMO ITEM] Subitemization of American Express(07/28/14)
Purpose of Disbursement Lodging		
Candidate Name		
Office Sought:	House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Radisson Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 200 Genesee Street		Amount of Each Disbursement this Period 1199.96
City Utica	State NY	Zip Code 13501
Purpose of Disbursement Lodging	Category/ Type 002	
Candidate Name	Transaction ID : B-S-3260	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Don's Ford BMW and Subaru</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 5712 Horatio Street		Amount of Each Disbursement this Period 580.64
City Utica	State NY	Zip Code 13502
Purpose of Disbursement Car Maintenance	Category/ Type 001	
Candidate Name	Transaction ID : B-S-3254	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 3947 New York 281		Amount of Each Disbursement this Period 75
City Cortland	State NY	Zip Code 13045
Purpose of Disbursement Fuel	Category/ Type 002	
Candidate Name	Transaction ID : B-S-3264	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. BJ's Wholesale Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 400 River Road		Amount of Each Disbursement this Period 101.01
City Utica	State NY	
Zip Code 13502	Purpose of Disbursement Food & Beverages	<b>Transaction ID : B-S-3246</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Spressos Coffee House</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 160 Brooks Road		Amount of Each Disbursement this Period 217.91
City Rome	State NY	
Zip Code 13441	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3252</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DoubleTree Hotel Syracuse</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 6301 New York 298		Amount of Each Disbursement this Period 1008.06
City East Syracuse	State NY	
Zip Code 13057	Purpose of Disbursement Fuel	<b>Transaction ID : B-S-3256</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. DoubleTree Hotel Syracuse</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 6301 New York 298		Amount of Each Disbursement this Period 314.14
City East Syracuse	State NY	
Zip Code 13057	Purpose of Disbursement Fuel	<b>Transaction ID : B-S-3257</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. U-Haul</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 430 Lomond Place		Amount of Each Disbursement this Period 638.33
City Utica	State NY	
Zip Code 13502	Purpose of Disbursement Storage Fee	<b>Transaction ID : B-S-3265</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. U-Haul</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 430 Lomond Place		Amount of Each Disbursement this Period 367.92
City Utica	State NY	
Zip Code 13502	Purpose of Disbursement Storage Fee	<b>Transaction ID : B-S-3267</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 760.54
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Advertising	<b>Transaction ID : B-S-3253</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 754.74
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Advertising	<b>Transaction ID : B-S-3248</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DoubleTree Hotel Syracuse</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 6301 New York 298		Amount of Each Disbursement this Period 370.14
City East Syracuse	State NY	
Zip Code 13057	Purpose of Disbursement Lodging	<b>Transaction ID : B-S-3250</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 750.08
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Advertising	<b>Transaction ID : B-S-3251</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 299.13
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Advertising	<b>Transaction ID : B-S-3266</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Nice N Easy Grocery Shoppes</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 501 Court Street		Amount of Each Disbursement this Period 119.89
City Utica	State NY	
Zip Code 13502-4206	Purpose of Disbursement Food & Beverages	<b>Transaction ID : B-S-3268</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Google</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 500
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Advertising	<b>Transaction ID : B-S-3255</b>
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nice N Easy Grocery Shoppes</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 501 Court Street		Amount of Each Disbursement this Period 70.2
City Utica	State NY	
Zip Code 13502-4206	Purpose of Disbursement Food & Beverages	<b>Transaction ID : B-S-3271</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mail Chimp</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 512 Means Street NW Suite 404		Amount of Each Disbursement this Period 30
City Atlanta	State GA	
Zip Code 30318-5788	Purpose of Disbursement Software Service	<b>Transaction ID : B-S-3272</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(07/28/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. BCLRCC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 40 Clearview Place		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-9561</b>
City Binghamton	State NY	
Zip Code 13901	Purpose of Disbursement Program Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Oswego County Republican Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 102 W Utica Street		Amount of Each Disbursement this Period 150 <b>Transaction ID : B-E-9560</b>
City Oswego	State NY	
Zip Code 13126-3008	Purpose of Disbursement Program Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Key Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 255 Genesee Street		Amount of Each Disbursement this Period 20 <b>Transaction ID : B-E-9569</b>
City Utica	State NY	
Zip Code 13501-3405	Purpose of Disbursement Banking Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	670.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Payroll Network</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 2092 Gaither Road		Amount of Each Disbursement this Period 6490.54 <b>Transaction ID : B-E-9570</b>
City Rockville	State MD	
Zip Code 20850	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Payroll Network</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 2092 Gaither Road		Amount of Each Disbursement this Period 4844.54 <b>Transaction ID : B-E-9571</b>
City Rockville	State MD	
Zip Code 20850	Purpose of Disbursement SEE MEMO ITEMS	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Payroll Network</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 2092 Gaither Road		Amount of Each Disbursement this Period 84.8 <b>Transaction ID : B-S-3278</b>
City Rockville	State MD	
Zip Code 20850	Purpose of Disbursement Payroll Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<b>[MEMO ITEM]</b> Subitemization of Payroll Network(07/30/14)
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6490.54
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Jennifer Battista</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 202 Bittern Court		Amount of Each Disbursement this Period 3694.74
City New Hartford	State NY	
Zip Code 13413-3516	Purpose of Disbursement Payroll	<b>Transaction ID : B-S-3275</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Payroll Network(07/30/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Fandrich</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 125 South Hoopes Avenue		Amount of Each Disbursement this Period 305.23
City Auburn	State NY	
Zip Code 13021	Purpose of Disbursement Payroll	<b>Transaction ID : B-S-3280</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Payroll Network(07/30/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Garth Curtis</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address St. Lawrence University SMC #1421 23 Romoda Drive		Amount of Each Disbursement this Period 759.77
City Canton	State NY	
Zip Code 13617	Purpose of Disbursement Payroll	<b>Transaction ID : B-S-3279</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Payroll Network(07/30/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Key Bank</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2014
Mailing Address 255 Genesee Street		Amount of Each Disbursement this Period -----,-----,----- 2.8
City Utica	State NY	
Zip Code 13501-3405	Purpose of Disbursement Banking Service Fee	<b>Transaction ID : B-E-9573</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period -----,-----,----- 7.95
City Newark	State NJ	
Zip Code 07101-1270	Purpose of Disbursement E-Merchant Fee	<b>Transaction ID : B-E-9577</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Promotions Inc</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address 249 N Keswick Avenue		Amount of Each Disbursement this Period -----,-----,----- -2605
City Glenside	State PA	
Zip Code 19038-4803	Purpose of Disbursement VOID- Banners & Signs	<b>Transaction ID : B-E-9576</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	-----,-----,----- -2594.25
<b>TOTAL</b> This Period (last page this line number only).....	-----,-----,-----



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Capitol Promotions Inc</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address 249 N Keswick Avenue		Amount of Each Disbursement this Period 2605 <b>Transaction ID : B-E-9585</b>
City Glenside	State PA	
Zip Code 19038-4803	Purpose of Disbursement Banners & Signs	Category/ Type 006
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Key Bank</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address 255 Genesee Street		Amount of Each Disbursement this Period 34 <b>Transaction ID : B-E-9583</b>
City Utica	State NY	
Zip Code 13501-3405	Purpose of Disbursement Banking Service Fee	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Catalyst Group RW, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 2718.59 <b>Transaction ID : B-E-9587</b>
City Washington	State DC	
Zip Code 20003-6300	Purpose of Disbursement SEE MEMO ITEMS	Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5357.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 364.02
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3289</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Catalyst Group RW, LLC(08/08/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Geppetto Catering</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address 4505 Queensbury Road		Amount of Each Disbursement this Period 354.57
City Riverdale	State MD	
Zip Code 20737	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3288</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Catalyst Group RW, LLC(08/08/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Catalyst Group RW, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 2000
City Washington	State DC	
Zip Code 20003-6300	Purpose of Disbursement Fundraising Consulting	<b>Transaction ID : B-S-3287</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Catalyst Group RW, LLC(08/08/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 116		
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Hummels Office Plus</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address 11 Hopper Street		Amount of Each Disbursement this Period 43.52 <b>Transaction ID : B-E-9586</b>
City Utica	State NY	
Zip Code 13501-3503	Purpose of Disbursement General Office Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Summit Consulting Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address 3230 East Broadway Road Suite C-260		Amount of Each Disbursement this Period 3979.04 <b>Transaction ID : B-E-9588</b>
City Phoenix	State AZ	
Zip Code 85040	Purpose of Disbursement Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Accurate Word, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2014
Mailing Address PO Box 1765		Amount of Each Disbursement this Period 588 <b>Transaction ID : B-E-9591</b>
City White Plains	State MD	
Zip Code 20695-1765	Purpose of Disbursement Printing	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4610.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 100 Pitcher Street		Amount of Each Disbursement this Period 54.6 <b>Transaction ID : B-E-9599</b>
City Utica	State NY	
Zip Code 13504-8900	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address PO Box 408		Amount of Each Disbursement this Period 5.14 <b>Transaction ID : B-E-9590</b>
City Newark	State NJ	
Zip Code 07101-0408	Purpose of Disbursement Cellular Phone Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 1500 Broadway		Amount of Each Disbursement this Period 67.52 <b>Transaction ID : B-E-9627</b>
City Lubbock	State TX	
Zip Code 79401-3117	Purpose of Disbursement Banking Service Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	127.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1800 <b>Transaction ID : B-E-9598</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 1621.38 <b>Transaction ID : B-E-9600</b>
City Bethesda State MD Zip Code 20824-0844	Purpose of Disbursement SEE MEMO ITEMS Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 1500 <b>Transaction ID : B-S-3290</b>
City Bethesda State MD Zip Code 20824-0844	Purpose of Disbursement Compliance Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(08/19/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3421.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 30.68
City Pittsburgh	State PA	
Zip Code 15250-7461	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3292</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(08/19/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 45
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement E-Merchant Fees	<b>Transaction ID : B-S-3294</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(08/19/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Key Bank</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address 255 Genesee Street		Amount of Each Disbursement this Period 20
City Utica	State NY	
Zip Code 13501-3405	Purpose of Disbursement Banking Service Fee	<b>Transaction ID : B-E-9603</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>			Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 100 Pitcher Street			Amount of Each Disbursement this Period 317.26 <b>Transaction ID : B-E-9620</b>
City Utica	State NY	Zip Code 13504-8900	
Purpose of Disbursement Postage	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. American Express</b>			Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address PO Box 1270			Amount of Each Disbursement this Period 311.66 <b>Transaction ID : B-E-9616</b>
City Newark	State NJ	Zip Code 07101-1270	
Purpose of Disbursement SEE MEMO ITEMS	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.		

Full Name (Last, First, Middle Initial) <b>C. American Express</b>			Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address PO Box 1270			Amount of Each Disbursement this Period 125 <b>Transaction ID : B-S-3299</b>
City Newark	State NJ	Zip Code 07101-1270	
Purpose of Disbursement E-Merchant Fee	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	[MEMO ITEM] Subitemization of American Express(08/27/14)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	317.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address 500 Seneca Street		Amount of Each Disbursement this Period 11.2
City Utica	State NY	
Zip Code 13502	Purpose of Disbursement Postage	Transaction ID : B-S-3296
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/27/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mail Chimp</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address 512 Means Street NW Suite 404		Amount of Each Disbursement this Period 25
City Atlanta	State GA	
Zip Code 30318-5788	Purpose of Disbursement Blast E-Mail Service	Transaction ID : B-S-3297
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/27/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Google</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 145.46
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Advertising	Transaction ID : B-S-3295
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/27/14)
State: District:		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Cooley Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address 806 Linden Avenue Suite 500		Amount of Each Disbursement this Period 415.93 <b>Transaction ID : B-E-9617</b>
City Rochester	State NY Zip Code 14625	
Purpose of Disbursement Printing	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Northland Communications</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address 9560 Main Street		Amount of Each Disbursement this Period 71.06 <b>Transaction ID : B-E-9618</b>
City Holland Patent	State NY Zip Code 13354-3819	
Purpose of Disbursement Utilities	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Pennysaver</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address PO Box 111		Amount of Each Disbursement this Period 508.8 <b>Transaction ID : B-E-9619</b>
City Norwich	State NY Zip Code 13815	
Purpose of Disbursement Advertising	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	995.79
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

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

Mailing Address 2092 Gaither Road

City Rockville State MD Zip Code 20850

Purpose of Disbursement Payroll Taxes 001 Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 28 / 2014

Amount of Each Disbursement this Period: 1734.29

**Transaction ID : B-E-9621**

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

Mailing Address 2092 Gaither Road

City Rockville State MD Zip Code 20850

Purpose of Disbursement SEE MEMO ITEMS 001 Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 28 / 2014

Amount of Each Disbursement this Period: 4290.25

**Transaction ID : B-E-9622**

Original vendors exceeding reporting threshold itemized as memo transactions.

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

Mailing Address 125 South Hoopes Avenue

City Auburn State NY Zip Code 13021

Purpose of Disbursement Payroll 001 Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 28 / 2014

Amount of Each Disbursement this Period: 1990.95

**Transaction ID : B-S-3302**

**[MEMO ITEM]**  
Subitemization of Payroll Network(08/28/14)

**SUBTOTAL** of Disbursements This Page (optional) ..... 6024.54

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Jennifer Battista</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 202 Bittern Court		Amount of Each Disbursement this Period 569.97
City New Hartford	State NY	
Zip Code 13413-3516	Purpose of Disbursement Payroll	<b>Transaction ID : B-S-3300</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Payroll Network(08/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Payroll Network</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 2092 Gaither Road		Amount of Each Disbursement this Period 64.3
City Rockville	State MD	
Zip Code 20850	Purpose of Disbursement Payroll Fees	<b>Transaction ID : B-S-3303</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Payroll Network(08/28/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Garth Curtis</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address St. Lawrence University SMC #1421 23 Romoda Drive		Amount of Each Disbursement this Period 1665.03
City Canton	State NY	
Zip Code 13617	Purpose of Disbursement Payroll	<b>Transaction ID : B-S-3301</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Payroll Network(08/28/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Catalyst Group RW, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 2000 <b>Transaction ID : B-E-9623</b>
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : B-E-9625</b>
City Newark State NJ Zip Code 07101-1270	Purpose of Disbursement E-Merchant Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Hummels Office Plus</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2014
Mailing Address 11 Hopper Street		Amount of Each Disbursement this Period 25.31 <b>Transaction ID : B-E-9632</b>
City Utica State NY Zip Code 13501-3503	Purpose of Disbursement General Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2033.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 1500 Broadway		Amount of Each Disbursement this Period 64.73
City Lubbock	State TX Zip Code 79401-3117	
Purpose of Disbursement Banking Service Fees	001	<b>Transaction ID : B-E-9684</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 1521.25
City Bethesda	State MD Zip Code 20824-0844	
Purpose of Disbursement SEE MEMO ITEMS	001	<b>Transaction ID : B-E-9638</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 1500
City Bethesda	State MD Zip Code 20824-0844	
Purpose of Disbursement Compliance Consulting	001	<b>Transaction ID : B-S-3304</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(09/16/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1585.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 11.25
City Bethesda	State MD	Zip Code 20824-0844
Purpose of Disbursement E-Merchant Fees	Category/Type 001	
Candidate Name	Transaction ID : B-S-3306	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(09/16/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Payroll Network</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 2092 Gaither Road		Amount of Each Disbursement this Period -3655.98
City Rockville	State MD	Zip Code 20850
Purpose of Disbursement CREDIT- Payroll	Category/Type	
Candidate Name	Transaction ID : B-E-9639	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Key Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 255 Genesee Street		Amount of Each Disbursement this Period 20
City Utica	State NY	Zip Code 13501-3405
Purpose of Disbursement Banking Service Fee	Category/Type 001	
Candidate Name	Transaction ID : B-E-9657	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	-3635.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Northland Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 9560 Main Street		Amount of Each Disbursement this Period 142.8 <b>Transaction ID : B-E-9643</b>
City Holland Patent	State NY	
Purpose of Disbursement Telephone Service		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 100 Pitcher Street		Amount of Each Disbursement this Period 5.75 <b>Transaction ID : B-E-9656</b>
City Utica	State NY	
Purpose of Disbursement Postage		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PJ Green</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 100 Whitesboro Street		Amount of Each Disbursement this Period 688.55 <b>Transaction ID : B-E-9644</b>
City Utica	State NY	
Purpose of Disbursement Postage		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	837.10
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address PO Box 408		Amount of Each Disbursement this Period 50.08 <b>Transaction ID : B-E-9645</b>
City Newark	State NJ Zip Code 07101-0408	
Purpose of Disbursement Cellular Phone Service	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 1500 Broadway		Amount of Each Disbursement this Period 16.73 <b>Transaction ID : B-E-9685</b>
City Lubbock	State TX Zip Code 79401-3117	
Purpose of Disbursement Banking Service Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 1500 Broadway		Amount of Each Disbursement this Period -64.73 <b>Transaction ID : B-E-9686</b>
City Lubbock	State TX Zip Code 79401-3117	
Purpose of Disbursement CREDIT- Banking Service Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2.08
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 85.77
City Newark	State NJ	
Zip Code 07101-1270	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-9655</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 55.77
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meal Expense	<b>Transaction ID : B-S-3307</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/25/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mail Chimp</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 512 Means Street NW Suite 404		Amount of Each Disbursement this Period 25
City Atlanta	State GA	
Zip Code 30318-5788	Purpose of Disbursement Blast E-Mail Service	<b>Transaction ID : B-S-3308</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/25/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	85.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Friends of Tony Picente</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address PO Box 4172			Amount of Each Disbursement this Period 200	
City Rome	State NY	Zip Code 13442	Transaction ID : B-E-9658	
Purpose of Disbursement Political Contribution		Category/ Type 011		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Payroll Network</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 2092 Gaither Road			Amount of Each Disbursement this Period 514.31	
City Rockville	State MD	Zip Code 20850	Transaction ID : B-E-9665	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			
Original vendors exceeding reporting threshold itemized as memo transactions.				

Full Name (Last, First, Middle Initial) <b>c. Payroll Network</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 2092 Gaither Road			Amount of Each Disbursement this Period 91.8	
City Rockville	State MD	Zip Code 20850	Transaction ID : B-S-3311	
Purpose of Disbursement Payroll Fees		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			
[MEMO ITEM] Subitemization of Payroll Network(09/26/14)				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	714.31
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Jennifer Battista</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 202 Bittern Court		Amount of Each Disbursement this Period 422.51
City New Hartford	State NY	
Zip Code 13413-3516	Purpose of Disbursement Payroll	Transaction ID : B-S-3310
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Payroll Network(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Human Rights Campaign PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 1640 Rhode Island Avenue NW		Amount of Each Disbursement this Period 720.49
City Washington	State DC	
Zip Code 20036-3200	Purpose of Disbursement Inkind: Online Advocacy and Fundraising	Transaction ID : B-I-9690
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Payroll Network</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 2092 Gaither Road		Amount of Each Disbursement this Period -319.44
City Rockville	State MD	
Zip Code 20850	Purpose of Disbursement Credit- Payroll Taxes	Transaction ID : B-E-9666
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	401.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Payroll Network</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 2092 Gaither Road		Amount of Each Disbursement this Period -1249.61
City Rockville	State MD	
Zip Code 20850	Purpose of Disbursement Credit- Payroll Taxes	Transaction ID : B-E-9667
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 100 Pitcher Street		Amount of Each Disbursement this Period 5.75
City Utica	State NY	
Zip Code 13504-8900	Purpose of Disbursement Postage	Transaction ID : B-E-9668
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	-1243.86
<b>TOTAL</b> This Period (last page this line number only).....	111273.29

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 116
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input checked="" type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Richard L. Hanna</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address PO Box 118		Amount of Each Disbursement this Period 10000 <b>Transaction ID : B-R-4</b>
City Utica	State NY	
Zip Code 13503-0118	Purpose of Disbursement Loan Repayment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Richard L. Hanna</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address PO Box 118		Amount of Each Disbursement this Period 240000 <b>Transaction ID : B-R-5</b>
City Utica	State NY	
Zip Code 13503-0118	Purpose of Disbursement Loan Repayment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Richard L. Hanna</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO Box 118		Amount of Each Disbursement this Period 63000 <b>Transaction ID : B-R-10</b>
City Utica	State NY	
Zip Code 13503-0118	Purpose of Disbursement Loan Repayment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary 2010	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	313000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 116	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Richard L. Hanna</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO Box 118		Amount of Each Disbursement this Period 5000 <b>Transaction ID : B-R-6</b>
City Utica	State NY	
Zip Code 13503-0118	Purpose of Disbursement Loan Repayment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary 2008	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Richard L. Hanna</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO Box 118		Amount of Each Disbursement this Period 10000 <b>Transaction ID : B-R-7</b>
City Utica	State NY	
Zip Code 13503-0118	Purpose of Disbursement Loan Repayment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary 2008	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Richard L. Hanna</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO Box 118		Amount of Each Disbursement this Period 12000 <b>Transaction ID : B-R-8</b>
City Utica	State NY	
Zip Code 13503-0118	Purpose of Disbursement Loan Repayment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary 2010	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	27000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 116	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Richard L. Hanna</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO Box 118		Amount of Each Disbursement this Period 10000 <b>Transaction ID : B-R-9</b>
City Utica	State NY	
Zip Code 13503-0118	Purpose of Disbursement Loan Repayment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary 2010	State: District:	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	350000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 116			
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. AmeriCU Credit Union</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address 1916 Black River Boulevard			Amount of Each Disbursement this Period 250	
City Rome	State NY	Zip Code 13440	Transaction ID : B-E-9631	
Purpose of Disbursement Contribution Refund		Category/ Type 010		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

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

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 116	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. DSG NY State PAC</b>		Date of Disbursement MM / DD / YYYY 07 / 29 / 2014
Mailing Address 184 Court Street		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-9567</b>
City Binghamton	State NY Zip Code 13901-3515	
Purpose of Disbursement Contribution Refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 116	
	<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)  
**Richard Hanna for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 30 / 2014</b>
Mailing Address <b>320 1st Street SE</b>		Amount of Each Disbursement this Period <b>5000</b> <b>Transaction ID : B-E-9568</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-1838</b>	Purpose of Disbursement <b>Political Contribution</b> <input type="checkbox"/> <b>011</b> Category/Type	
Candidate Name <b>National Republican Congressional Committee</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: _____ District: _____		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>5000.00</b>

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L3

Richard Hanna for Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2008

Richard L. Hanna

Primary

General

Other (specify) ▼

Primary 2008

Mailing Address

PO Box 118

City

State

ZIP Code

Utica

NY

13503-0118

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000

5000

0

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

02 / 15 / 2008

On Demand

0.00 % (apr)

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

0.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L8

Richard Hanna for Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2008

Richard L. Hanna

Primary

General

Other (specify) ▼

Primary 2008

Mailing Address

PO Box 118

City

State

ZIP Code

Utica

NY

13503-0118

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000

10000

0

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

06

03

2008

On Demand

0.00

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

0.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L15

Richard Hanna for Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Richard L. Hanna

Primary

General

Other (specify) ▼

Primary 2010

Mailing Address

PO Box 118

City

State

ZIP Code

Utica

NY

13503-0118

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

12000

12000

0

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

02

02

2010

On Demand

0.00

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

0.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L16

Richard Hanna for Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Richard L. Hanna

Primary

General

Other (specify) ▼

Primary 2010

Mailing Address

PO Box 118

City

State

ZIP Code

Utica

NY

13503-0118

Original Amount of Loan

10000

Cumulative Payment To Date

10000

Balance Outstanding at Close of This Period

0

**TERMS**

Date Incurred

02 / 17 / 2010

Date Due

On Demand

Interest Rate

0.00 % (apr)

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

0.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L17

Richard Hanna for Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Richard L. Hanna

Primary

General

Other (specify) ▼

Primary 2010

Mailing Address

PO Box 118

City

State

ZIP Code

Utica

NY

13503-0118

Original Amount of Loan

75000

Cumulative Payment To Date

63000

Balance Outstanding at Close of This Period

12000

**TERMS**

Date Incurred

06 / 29 / 2010

Date Due

On Demand

Interest Rate

0.00 % (apr)

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

12000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Richard Hanna for Congress Committee** Transaction ID : **SC/10-L18**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Richard L. Hanna</b>	<b>[PERSONAL FUNDS]</b>	Election: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2010
Mailing Address PO Box 118		

City	State	ZIP Code
Utica	NY	13503-0118

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7000	0	7000

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 08 / D 25 / Y 2010 Y	M / D / Y On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	7000.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L19

Richard Hanna for Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Richard L. Hanna

Primary

General

Other (specify) ▼

General 2010

Mailing Address

PO Box 118

City

State

ZIP Code

Utica

NY

13503-0118

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

150000

0

150000

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
10 / 27 / 2010

M M / D D / Y Y Y Y  
On Demand

0.00

% (apr)

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

150000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L21

Richard Hanna for Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Richard L. Hanna

Primary

General

Other (specify) ▼

Primary 2012

Mailing Address

PO Box 118

City

State

ZIP Code

Utica

NY

13503-0118

Original Amount of Loan

25000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

25000

**TERMS**

Date Incurred

M 09 / D 30 / Y 2011 Y

Date Due

M / D / Y On Demand Y Y Y

Interest Rate

0.00 % (apr)

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

25000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L22

Richard Hanna for Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Richard L. Hanna

Primary

General

Other (specify) ▼

Mailing Address

PO Box 118

City

State

ZIP Code

Utica

NY

13503-0118

Original Amount of Loan

55000

Cumulative Payment To Date

55000

Balance Outstanding at Close of This Period

0

**TERMS**

Date Incurred

06

30

2013

Date Due

On Demand

Interest Rate

0.00

% (apr)

Secured:

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

0.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Richard Hanna for Congress Committee** Transaction ID : **SC/10-L23**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Richard L. Hanna</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 118		

City	State	ZIP Code
Utica	NY	13503-0118

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
240000	240000	0

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	M 12 / D 26 / Y 2013 Y	M M / D D / Y Y Y Y On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	0.00
<b>TOTALS</b> This Period (last page in this line only).....	194000.00
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	