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Image# 15950044087

FEC	
<b>FORM</b>	3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	/ (1	For An Auth	orized Com	mittee			Office Use Only
NAME OF COMMITTEE (ii)		E OR PRINT ▼		ample: If typin er the lines.	g, type	12FE4M5	
Izzo For Cong	gress						1
ADDRESS (number a		O Box 7673					
Check if d							
than previous reported. (		/ilmington				DE	19803
2. <b>FEC IDENTIF</b>	ICATION NUMB	ER▼ _	CITY			STATE	ZIP CODE A STATE ▼ DISTRICT
C C005480	040	3	. IS THIS REPORT	× NEW	OR	AMENE (A)	
4 TVDE OF RE	EPORT (Choose	Onol					
(a) Quarterly F	·	(b)	12-Day PRE	-Election Repo	ort for the:		
				Primary (12P)	)	General (1	(12R) Runoff (12R)
April 1	5 Quarterly Repor	t (Q1)	П	Convention (	12C)	Special (1	2S)
July 1	5 Quarterly Report	t (Q2)		`	, _		<i>'</i>
Octob	er 15 Quarterly Re	eport (Q3)	Election on	M M /	D D /	Y " Y " Y " Y	in the State of
X Janua	ry 31 Year-End Re	port (YE) (c)	30-Day <b>POS</b>	<b>T</b> -Election Rep	oort for the:		
				General (30G		Runoff (30	DR) Special (30S)
Termin	nation Report (TER	)				Y " Y " Y " Y	in the
		,	Election on	M = M /	D D /	Y " Y " Y " Y	in the State of
5. Covering Period	d 11	25 / Y	у у у 2014	through	M M 12	/ D D /	Y Y Y Y Y 2014
I certify that I have	examined this Re	eport and to the	best of my kn	owledge and	belief it is tro	ue, correct and	d complete.
Type or Print Name	of Treasurer _	Kevin Michael Izzo					
Signature of Treasur	rer <u>Kevin Mic</u>	hael Izzo		[Electronically I	Filed] D	Date 12	7 D D 7 Y Y Y Y Y Y 2014
NOTE: Submission o	f false, erroneous,	or incomplete in	formation may	subject the per	son signing t	his Report to t	he penalties of 2 U.S.C. §437g.
Office							EEC EODM 2
Use Only							FEC FORM 3 (Revised 02/2003)

### SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

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Write or Type Committee Name

#### Izzo For Congress

12 31 2014 25 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 0.00 9147.95 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 9147.95 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 0.00 2314.00 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 2314.00 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 16.98 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 3000.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 12795.00 Schedule C and/or Schedule D).....

#### 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 PAGE 3 / 7 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

#### Izzo For Congress

25 2014 12 31 2014 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. C	ONTRIBUTIONS (other than loans) FROM:		
(a	) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	0.00	5555.00
	(ii) Unitemized	0.00	3167.95
	(iii) TOTAL of contributions from individuals	0.00	8722.95
(b		0.00	0.00
(0	(such as PACs)	0.00	225.00
(d (e	) TOTAL CONTRIBUTIONS	0.00	200.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	9147.95
	RANSFERS FROM OTHER UTHORIZED COMMITTEES	0.00	0.00
3. L0	OANS: ) Made or Guaranteed by the		
(a	Candidate	0.00	12795.00
(b		0.00	0.00
(C	(add Lines 13(a) and (b))	0.00	12795.00
E	FFSETS TO OPERATING XPENDITURES	0.00	0.00
(F	Refunds, Rebates, etc.)	9	0.00
	THER RECEIPTS Dividends, Interest, etc.)	0.00	0.00
11	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	21942.95

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17.	OPERATING EXPENDITURES	0.00	2314.00	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	
19.	LOAN REPAYMENTS:			
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00	
	(b) Of All Other Loans	0.00	0.00	
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00	
20.	REFUNDS OF CONTRIBUTIONS TO:			
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00	
21.	OTHER DISBURSEMENTS	0.00	19611.97	
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	21925.97	
	III. CASH SUI	MMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD			16.98	
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)			0.00	
25.	SUBTOTAL (add Line 23 and Line 24)		16.98	
26.	TOTAL DISBURSEMENTS THIS PERIOD (fron	n Line 22)	0.00	
27 CASH ON HAND AT CLOSE OF REPORTING PERIOD			16.98	

## SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

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	13a
	13h

OANS		for each category of the Detailed Summary Page (check only one) 13a
IAME OF COMMITTEE (In Ful	 l)	Transaction ID : SC/9.4187
zzo For Congress	,	
LOAN SOURCE Full Name Rose Izzo	e (Last, First, Middle Initial)	Election: 2014 Primary
Mailing Address PO Box 7673		General Other (specify) ▼
City	State	ZIP Code
Wilmington	DE	19803
Original Amount of Loan	Cumulative Pa	yment To Date  Balance Outstanding at Close of This Period  0.00  3000.00
2 2	2	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
Date Incurre	2013 Y M M / D E	% (apr)
List All Endorsers or Guar	rantors (if any) to Loan Source	Yes No
1. Full Name (Last, First, I	Middle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, M	1iddle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, M	1iddle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, M	fiddle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This	Page (optional)	
	e in this line only)	
Carry outstanding balance on	lly to LINE 3, Schedule D, for th	s line. If no Schedule D, carry forward to appropriate line of Summary.

### SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

**PAGE** 

×	13a
	13b

**LOANS** (check only one) Detailed Summary Page Transaction ID: SC/10.4102 NAME OF COMMITTEE (In Full) Izzo For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Primary Rose Izzo General Mailing Address Other (specify) PO Box 7673 City State ZIP Code DE 19803 Wilmington Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 11500.00 0.00 11500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>30 <sup>M</sup>08<sup>M</sup> 2013 0.00 ňone % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 11500.00 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)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

**PAGE** 

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	13b

**LOANS** (check only one) Detailed Summary Page Transaction ID: SC/10.4320 NAME OF COMMITTEE (In Full) Izzo For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Primary Rose Izzo ★ General Mailing Address Other (specify) PO Box 7673 City State ZIP Code DE 19803 Wilmington Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1295.00 0.00 1295.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>25 <sup>M</sup>08<sup>M</sup> ž014 0.00 ňone % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 1295.00 TOTALS This Period (last page in this line only) ...... 12795.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.