

# 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

committee to elect marsicano for congress

ADDRESS (number and street) 1135 pilot point

Check if different than previously reported. (ACC)

hazle township PA 18202

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼ C C00580258

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

STATE ▼ DISTRICT  
PA 11

## 4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

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

Election on M M / D D / Y Y Y Y in the State of  

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

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

Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y

07 / 01 / 2016 through 09 / 30 / 2016

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 tammy ondeck, tammy, , ,

Signature of Treasurer tammy ondeck, tammy, , , [Electronically Filed] Date M M / D D / Y Y Y Y

10 / 14 / 2016

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

Office Use Only									
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**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
committee to elect marsicano for congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	24000.00	29450.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	24000.00	29450.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	12328.33	74995.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	12328.33	74995.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	297754.66	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	343299.68	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

committee to elect marsicano for congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	19300.00	19550.00
(ii) Unitemized.....	1450.00	1650.00
(iii) TOTAL of contributions from individuals ▶	20750.00	21200.00
(b) Political Party Committees.....	250.00	250.00
(c) Other Political Committees (such as PACs).....	3000.00	8000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	24000.00	29450.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	13000.00	343299.68
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	13000.00	343299.68
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	37000.00	372749.68

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12328.33	74995.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	12328.33	74995.02

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	273082.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	37000.00
25. SUBTOTAL (add Line 23 and Line 24).....	310082.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12328.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	297754.66

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

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

FOR LINE NUMBER: PAGE 5 OF 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
committee to elect marsicano for congress

**A.** Full Name (Last, First, Middle Initial)  
Anthony, Calucci, , ,  
Mailing Address 1144 w 15th

City: Hazleton State: PA Zip Code: 18201

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Restaurant

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 11 / 2016  
Transaction ID : SA11AI.4416

Amount of Each Receipt this Period: 250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Baran, Barry, , ,  
Mailing Address 144 Berwick

City: Beaver Meadows State: PA Zip Code: 18216

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Pilot

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 22 / 2016  
Transaction ID : SA11AI.4478

Amount of Each Receipt this Period: 250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Bonomo, Anthony, , ,  
Mailing Address 675 N Broad St

City: W. Hazleton State: PA Zip Code: 18202

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation:

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 27 / 2016  
Transaction ID : SA11AI.4493

Amount of Each Receipt this Period: 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 6 OF 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
committee to elect marsicano for congress

**A.** Full Name (Last, First, Middle Initial)  
Butera, Michael, , ,  
Mailing Address 121 S Main  
City Pittston State PA Zip Code 18640  
FEC ID number of contributing federal political committee. C  
Name of Employer self Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date 250.00

Date of Receipt 07 / 15 / 2016  
Transaction ID : SA11AI.4495  
Amount of Each Receipt this Period 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Carney, Daniel, , ,  
Mailing Address One Washington St  
City east Stroudsburg State PA Zip Code 18301  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date 2700.00

Date of Receipt 07 / 16 / 2016  
Transaction ID : SA11AI.4515  
Amount of Each Receipt this Period 2700.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Christino, Maurice, , ,  
Mailing Address 209 old airport rd  
City Drums State PA Zip Code 18222  
FEC ID number of contributing federal political committee. C  
Name of Employer PennDot Occupation foreman  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date 250.00

Date of Receipt 07 / 11 / 2016  
Transaction ID : SA11AI.4412  
Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3200.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 7 OF 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**committee to elect marsicano for congress**

**A.** Full Name (Last, First, Middle Initial)  
**Crossin, Frank, , ,**  
 Mailing Address 575 Pierce St  
 City Kingston State PA Zip Code 18704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Public Accountant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Election Cycle-to-Date 250.00

Date of Receipt 07 / 12 / 2016  
**Transaction ID : SA11AI.4407**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Decosmo, Michael, , ,**  
 Mailing Address 1201 N Church  
 City Hazleton State PA Zip Code 18201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Accountant  
 Self  
 Receipt For:  Primary  General  Other (specify) ▼  
 Election Cycle-to-Date 250.00

Date of Receipt 07 / 21 / 2016  
**Transaction ID : SA11AI.4513**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Defazio, Louis, , ,**  
 Mailing Address 18801 Hilltop Ln  
 City Tomball State TX Zip Code 77377  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Flight instructor  
 Sel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Election Cycle-to-Date 2700.00

Date of Receipt 07 / 26 / 2016  
**Transaction ID : SA11AI.4453**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3200.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 8 OF 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
committee to elect marsicano for congress

**A.** Full Name (Last, First, Middle Initial)  
Delese, Robert, , ,  
Mailing Address Main St  
City Freeland State PA Zip Code 18224  
FEC ID number of contributing federal political committee. C  
Name of Employer na Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016  
Transaction ID : SA11AI.4457  
Amount of Each Receipt this Period  
500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Dietz, Eric, , ,  
Mailing Address 33 Redwood Ave  
City Sugarloaf State PA Zip Code 18249  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Occupation Carpenter  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 27 / 2016  
Transaction ID : SA11AI.4470  
Amount of Each Receipt this Period  
250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Dulcey, Kathleen, , ,  
Mailing Address 174 Dulcey Rd  
City Weatherly State PA Zip Code 18255  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Occupation Electrical  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016  
Transaction ID : SA11AI.4448  
Amount of Each Receipt this Period  
250.00  
 Memo Item

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

1000.00



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

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

FOR LINE NUMBER: PAGE 9 OF 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
committee to elect marsicano for congress

**A.** Full Name (Last, First, Middle Initial)  
Freeman, William, , ,  
Mailing Address PO 128  
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 ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 13 2016  
Transaction ID : SA11AI.4425  
Amount of Each Receipt this Period  
300.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Gadola, Scott, , ,  
Mailing Address 745 Pardeesville Rd.  
City State Zip Code  
Pardeesville PA 18202  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Self Construction  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 03 2016  
Transaction ID : SA11AI.4446  
Amount of Each Receipt this Period  
300.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Gentilesco, William, , ,  
Mailing Address 79 N Green Briar  
City State Zip Code  
Drums PA 18222  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Retired Engineer  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 08 2016  
Transaction ID : SA11AI.4418  
Amount of Each Receipt this Period  
250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 850.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 10 OF 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
committee to elect marsicano for congress

**A.** Full Name (Last, First, Middle Initial)  
Glassberg, Lee Jay, , ,  
Mailing Address 1896 East Broad  
City Beaver Meadows State PA Zip Code 18216  
FEC ID number of contributing federal political committee. C  
Name of Employer Retired Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 27 / 2016  
Transaction ID : SA11AI.4462  
Amount of Each Receipt this Period  
250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Grzyb, Louise, , ,  
Mailing Address 100 Franklin  
City Hazleton State PA Zip Code 18202  
FEC ID number of contributing federal political committee. C  
Name of Employer Retired Occupation Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 08 / 2016  
Transaction ID : SA11AI.4434  
Amount of Each Receipt this Period  
200.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Haentjens, R Peter, , ,  
Mailing Address 215 Thomas Lane  
City Hazleton State PA Zip Code 18202  
FEC ID number of contributing federal political committee. C  
Name of Employer Retired Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2016  
Transaction ID : SA11AI.4486  
Amount of Each Receipt this Period  
250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00  
**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 11 OF 34	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**committee to elect marsicano for congress**

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

Mailing Address 144 Main St

City Pittston	State PA	Zip Code 18776
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Insurance
--------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2016

**Transaction ID : SA11AI.4536**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address Old Airport Rd

City Drums	State PA	Zip Code 18202
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2016

**Transaction ID : SA11AI.4476**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 26 Spring Meadow Dr

City Downingtown	State PA	Zip Code 19335
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FEC ID number of contributing federal political committee. **C**

Name of Employer na	Occupation Housewife
------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 28 / 2016

**Transaction ID : SA11AI.4451**

Amount of Each Receipt this Period

Memo Item

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

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

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

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

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

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NAME OF COMMITTEE (In Full)  
**committee to elect marsicano for congress**

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

Mailing Address 110 St Charles

City Hazleton State PA Zip Code 18202

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

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2016

Transaction ID : SA11AI.4474

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 116 Washington

City Scranton State PA Zip Code 18503

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

Name of Employer Self Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2016

Transaction ID : SA11AI.4482

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 2408 Tilghman

City Allentown State PA Zip Code 18202

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

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016

Transaction ID : SA11AI.4521

Amount of Each Receipt this Period  
2250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2750.00

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

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

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

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

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NAME OF COMMITTEE (In Full)  
committee to elect marsicano for congress

**A.** Full Name (Last, First, Middle Initial)  
Montone, James, , ,  
Mailing Address PO 195  
City Ebervale State PA Zip Code 18223  
FEC ID number of contributing federal political committee. C  
Name of Employer HJSA Occupation Foreman  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date 250.00

Date of Receipt 07 / 27 / 2016  
Transaction ID : SA11AI.4466  
Amount of Each Receipt this Period 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Ondeck, Michael, , ,  
Mailing Address 19 W 14th  
City Hazleton State PA Zip Code 18201  
FEC ID number of contributing federal political committee. C  
Name of Employer Retired Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date 500.00

Date of Receipt 07 / 27 / 2016  
Transaction ID : SA11AI.4468  
Amount of Each Receipt this Period 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Pedriani, Maria, , ,  
Mailing Address 23 Hilltop Rd  
City Hazleton State PA Zip Code 18201  
FEC ID number of contributing federal political committee. C  
Name of Employer Retired Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date 250.00

Date of Receipt 07 / 14 / 2016  
Transaction ID : SA11AI.4507  
Amount of Each Receipt this Period 250.00  
 Memo Item

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

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

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

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

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NAME OF COMMITTEE (In Full)  
**committee to elect marsicano for congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rafalli, Eugene, , ,**  
 Mailing Address 2619 Christine  
 City Hazle Twp. State PA Zip Code 18202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Election Cycle-to-Date 250.00

Date of Receipt 07 / 19 / 2016  
**Transaction ID : SA11AI.4458**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Schiavo, Pasco, , ,**  
 Mailing Address 124 W Spruce  
 City Hazleton State PA Zip Code 18201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Election Cycle-to-Date 250.00

Date of Receipt 07 / 12 / 2016  
**Transaction ID : SA11AI.4511**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Senape, Alfred, , ,**  
 Mailing Address 153 Mountain Rd  
 City Sugarloaf State PA Zip Code 18202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Election Cycle-to-Date 500.00

Date of Receipt 07 / 21 / 2016  
**Transaction ID : SA11AI.4480**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

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

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

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

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

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NAME OF COMMITTEE (In Full)  
**committee to elect marsicano for congress**

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

Mailing Address 614 Main St

City Freeland State PA Zip Code 18224

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

Name of Employer Self Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2016

Transaction ID : SA11AI.4444

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

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

Mailing Address 45 W 22nd

City West Hazleton State PA Zip Code 18202

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

Name of Employer Retired Occupation Truckdriver

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016

Transaction ID : SA11AI.4430

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

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

Mailing Address 1 Creekside Dr

City Shavertown State PA Zip Code 18708

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

Name of Employer Self Occupation Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016

Transaction ID : SA11AI.4428

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 1500.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
committee to elect marsicano for congress

**A.** Full Name (Last, First, Middle Initial)  
Tedesco, Dennis, , ,  
Mailing Address 1500 N Church  
City Hazleton State PA Zip Code 18201  
FEC ID number of contributing federal political committee. C  
Name of Employer Retired Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 27 / 2016  
Transaction ID : SA11AI.4484  
Amount of Each Receipt this Period  
250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Tedesco, Larry, , ,  
Mailing Address 915 N Wyoming  
City Hazleton State PA Zip Code  
FEC ID number of contributing federal political committee. C  
Name of Employer Retired Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2016  
Transaction ID : SA11AI.4519  
Amount of Each Receipt this Period  
350.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
veglia, Lorna, , ,  
Mailing Address 21 E 14th  
City Hazleton State PA Zip Code 18201  
FEC ID number of contributing federal political committee. C  
Name of Employer Retired Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 27 / 2016  
Transaction ID : SA11AI.4505  
Amount of Each Receipt this Period  
500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

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

FOR LINE NUMBER: PAGE 17 OF 34  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**committee to elect marsicano for congress**

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

Mailing Address 185 Reliance Drive

City Wilkes-Barre State PA Zip Code 18702

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

Name of Employer Self Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 27 / 2016

Transaction ID : SA11AI.4492

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 619 Scotch Hill Rd

City Hazle Twp. State PA Zip Code 18202

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

Name of Employer Self Occupation Plumbing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2016

Transaction ID : SA11AI.4488

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	19300.00

# 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 34	
<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**committee to elect marsicano for congress**

**A.** Full Name (Last, First, Middle Initial)  
**Northcentral Democratic Caucus**

Mailing Address 722 3rd Ave

City Williamsport	State PA	Zip Code 17701
----------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016

**Transaction ID : SA11B.4439**

Amount of Each Receipt this Period  
 250.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

# 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 34	
<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)  
**committee to elect marsicano for congress**

**A.** Full Name (Last, First, Middle Initial)  
**International Union Operating Committee**

Mailing Address 1375 Virginia Dr

City Ft. Washington	State PA	Zip Code 19034
------------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2016

**Transaction ID : SA11C.4530**

Amount of Each Receipt this Period  
 3000.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 20 OF 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
committee to elect marsicano for congress

**A.** Full Name (Last, First, Middle Initial)  
committee to elect marsicano for congress

Mailing Address 1135 pilot point

City hazle township State PA Zip Code 18202

FEC ID number of contributing federal political committee. C C00580258

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
13000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2016

Transaction ID : SA13A.4525

Amount of Each Receipt this Period  
 13000.00

Memo Item

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	13000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	13000.00

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

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

FOR LINE NUMBER: PAGE 21 OF 34  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
committee to elect marsicano for congress

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

Mailing Address 216 Center Street

City Dupont State PA Zip Code 18641

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2016

Transaction ID : SA14.4550

Amount of Each Receipt this Period  
 -536.25

Memo Item  
 Redesignate: Refund for over payment - Advertising

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 34			
	<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)  
committee to elect marsicano for congress

Full Name (Last, First, Middle Initial) <b>A. 24 Hour Wristbands</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2016		
Mailing Address 14550 Beechnut Street			FEC Identification Number C		
City houston	State TX	Zip Code 77083	Amount of Each Disbursement this Period 625.88		
Purpose of Disbursement Advertising		Category/ Type	Transaction ID : SB17.4365		
Candidate Name Marsicano, Michael, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) <b>B. Ecanvasser</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2016		
Mailing Address Monahan Road			FEC Identification Number C		
City Cork	State ZZ	Zip Code	Amount of Each Disbursement this Period 69.99		
Purpose of Disbursement advertising		Category/ Type	Transaction ID : SB17.4347		
Candidate Name Marsicano, Michael, , ,		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) <b>C. Ecanvasser</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2016		
Mailing Address Monahan Road			FEC Identification Number C		
City Cork	State ZZ	Zip Code	Amount of Each Disbursement this Period 69.99		
Purpose of Disbursement Advertising		Category/ Type	Transaction ID : SB17.4356		
Candidate Name Marsicano, Michael, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	765.86
<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 23 OF 34			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**committee to elect marsicano for congress**

Full Name (Last, First, Middle Initial) <b>A. Ecanvasser</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2016
Mailing Address Monahan Road		FEC Identification Number C
City Cork	State ZZ	Zip Code
Purpose of Disbursement IT		Amount of Each Disbursement this Period 69.99
Candidate Name <b>Marsicano, Michael, , ,</b>		Transaction ID : <b>SB17.4378</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address Menlow Park		FEC Identification Number C
City Menlow Park	State CA	Zip Code 94025
Purpose of Disbursement advertising		Amount of Each Disbursement this Period 108.58
Candidate Name <b>Marsicano, Michael, , ,</b>		Transaction ID : <b>SB17.4343</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2016
Mailing Address Menlow Park		FEC Identification Number C
City Menlow Park	State CA	Zip Code 94025
Purpose of Disbursement Advertising		Amount of Each Disbursement this Period 32.59
Candidate Name <b>Marsicano, Michael, , ,</b>		Transaction ID : <b>SB17.4373</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	211.16
<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 24 OF 34	
	<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)  
**committee to elect marsicano for congress**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2016
Mailing Address Menlow Park		FEC Identification Number C
City Menlow Park	State CA	Zip Code 94025
Purpose of Disbursement Advertising	Category/ Type	Amount of Each Disbursement this Period 467.65
Candidate Name <b>Marsicano, Michael, , ,</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>SB17.4376</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address Menlow Park		FEC Identification Number C
City Menlow Park	State CA	Zip Code 94025
Purpose of Disbursement IT	Category/ Type	Amount of Each Disbursement this Period 452.56
Candidate Name <b>Marsicano, Michael, , ,</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>SB17.4386</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address Menlow Park		FEC Identification Number C
City Menlow Park	State CA	Zip Code 94025
Purpose of Disbursement Advertising	Category/ Type	Amount of Each Disbursement this Period 452.56
Candidate Name <b>Marsicano, Michael, , ,</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>SB17.4391</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1372.77
<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 25 OF 34			
	<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)  
**committee to elect marsicano for congress**

Full Name (Last, First, Middle Initial) <b>A. Graphicsland</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016
Mailing Address 8061 west 186th st		FEC Identification Number C
City timley park	State IL	Zip Code 60487
Purpose of Disbursement Advertising	Category/ Type	
Candidate Name <b>Marsicano, Michael, , ,</b>		Amount of Each Disbursement this Period 1659.90
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.4369</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. John Kosko</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016
Mailing Address 239 Schuhler St		FEC Identification Number C
City Kingston	State PA	Zip Code 18704
Purpose of Disbursement	Category/ Type	
Candidate Name <b>Marsicano, Michael, , ,</b>		Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.4340</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. John Kosko</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016
Mailing Address 239 Schuhler St		FEC Identification Number C
City Kingston	State PA	Zip Code 18704
Purpose of Disbursement it	Category/ Type	
Candidate Name <b>Marsicano, Michael, , ,</b>		Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : SB17.4349</b>
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4659.90
<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 34	
	<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)  
**committee to elect marsicano for congress**

Full Name (Last, First, Middle Initial) <b>A. John Kosko</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016
Mailing Address 239 Schuhler St		FEC Identification Number C
City Kingston	State PA	Zip Code 18704
Purpose of Disbursement Advertising	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 445.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4388
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Liquidweb</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2016
Mailing Address 2703 ena drive		FEC Identification Number C
City Lansing	State MI	Zip Code 48917
Purpose of Disbursement IT	Category/Type	
Candidate Name <b>Marsicano, Michael, , ,</b>	Amount of Each Disbursement this Period 105.66	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4395
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Lowes</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016
Mailing Address Susquehanna Blvd		FEC Identification Number C
City west Hazleton	State PA	Zip Code 18202
Purpose of Disbursement Advertising	Category/Type	
Candidate Name <b>Marsicano, Michael, , ,</b>	Amount of Each Disbursement this Period 331.55	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4398
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	882.21
<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 34			
	<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)  
**committee to elect marsicano for congress**

Full Name (Last, First, Middle Initial) <b>A. Pensxpress</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 1070 h route 34			FEC Identification Number C		
City matawan	State NJ	Zip Code 07747	Amount of Each Disbursement this Period 490.00		
Purpose of Disbursement Advertising		Category/ Type	Transaction ID : SB17.4380		
Candidate Name <b>Marsicano, Michael, , ,</b>		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Pensxpress</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2016		
Mailing Address 1070 h route 34			FEC Identification Number C		
City matawan	State NJ	Zip Code 07747	Amount of Each Disbursement this Period 470.00		
Purpose of Disbursement Advertising		Category/ Type	Transaction ID : SB17.4390		
Candidate Name <b>Marsicano, Michael, , ,</b>		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Pensxpress</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016		
Mailing Address 1070 h route 34			FEC Identification Number C		
City matawan	State NJ	Zip Code 07747	Amount of Each Disbursement this Period 915.00		
Purpose of Disbursement Advertising		Category/ Type	Transaction ID : SB17.4393		
Candidate Name <b>Marsicano, Michael, , ,</b>		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1875.00
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**committee to elect marsicano for congress**

Full Name (Last, First, Middle Initial) <b>A. Precision Signs</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2016
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement Advertising		Amount of Each Disbursement this Period 1638.00
Candidate Name <b>Marsicano, Michael, , ,</b>		Transaction ID : <b>SB17.4364</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2016
Mailing Address 180 Susquehanna Blvd		FEC Identification Number C
City	State	Zip Code
Hazleton	PA	18201
Purpose of Disbursement advertising		Amount of Each Disbursement this Period 68.89
Candidate Name		Transaction ID : <b>SB17.4350</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2016
Mailing Address 180 Susquehanna Blvd		FEC Identification Number C
City	State	Zip Code
Hazleton	PA	18201
Purpose of Disbursement advertising		Amount of Each Disbursement this Period 158.99
Candidate Name		Transaction ID : <b>SB17.4351</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1865.88
<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 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**committee to elect marsicano for congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2016
Mailing Address 180 Susquehanna Blvd		FEC Identification Number C
City Hazleton	State PA	Zip Code 18201
Purpose of Disbursement advertising		Amount of Each Disbursement this Period 188.00
Candidate Name <b>Marsicano, Michael, , ,</b>		Transaction ID : <b>SB17.4352</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. VistaPrint</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2016
Mailing Address 95 Hayden Ave.		FEC Identification Number C
City Lexington	State MA	Zip Code 02241
Purpose of Disbursement advertising		Amount of Each Disbursement this Period 206.34
Candidate Name <b>Marsicano, Michael, , ,</b>		Transaction ID : <b>SB17.4382</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	394.34
<b>TOTAL</b> This Period (last page this line number only).....▶	12027.12

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4525**  
 committee to elect marsicano for congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) committee to elect marsicano for congress		<input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1135 pilot point			
City hazle township	State PA	ZIP Code 18202	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 13000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 13000.00
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<b>TERMS</b>	Date Incurred M 07 / D 11 / Y 2016	Date Due M M / D D / Y Y Y Y	Interest Rate (If none, enter 0) % (apr)	Secured: <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).....▶	13000.00
<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**

NAME OF COMMITTEE (In Full) **committee to elect marsicano for congress** Transaction ID : **SC/10.4145**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Marsicano, Michael, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1135 Pilot Point			
City Hazle Township	State PA	ZIP Code 18202	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 16000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 16000.00
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<b>TERMS</b>	Date Incurred M 05 / D 19 / Y 2015	Date Due M M / D D / Y none	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	16000.00
<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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4144**  
 committee to elect marsicano for congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Marsicano, Michael, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1135 Pilot Point			
City Hazle Township	State PA	ZIP Code 18202	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
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<b>TERMS</b>	Date Incurred M 09 / D 30 / Y 2015	Date Due M M / D D / Y Y Y Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	[ ] 100000.00
<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**

NAME OF COMMITTEE (In Full) **committee to elect marsicano for congress** Transaction ID : **SC/10.4255**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Marsicano, Michael, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1135 Pilot Point			
City Hazle Township	State PA	ZIP Code 18202	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 14299.68	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 14299.68
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<b>TERMS</b>	Date Incurred M 01 / D 13 / Y 2016	Date Due M M / D D / Y Y Y Y	Interest Rate (If none, enter 0) % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	14299.68
<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**

NAME OF COMMITTEE (In Full) **committee to elect marsicano for congress** Transaction ID : **SC/10.4338**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Marsicano, Michael, , ,		<input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1135 Pilot Point			
City Hazle Township	State PA	ZIP Code 18202	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 200000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 200000.00
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<b>TERMS</b>	Date Incurred M 06 / D 30 / Y 2016	Date Due M M / D D / Y Y Y Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	200000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	343299.68

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