FFC I		OF RE BURSE	MENTS	Office	Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRIN		xample: If typing, type ver the lines.	12FE4M5	
	GRESS				
ADDRESS (number and street)	209 BIRCH RU	JN ROAD			
Check if different	PO BOX 832			MD 21620	
reported. (ACC)					
2. FEC IDENTIFICATION N C C00507335	UMBER ▼	CITY 3. IS THIS REPORT	× NEW (N) OR	STATE AMENDED (A)	ZIP CODE STATE ▼ DISTRICT
<ul> <li>4. TYPE OF REPORT (Ch</li> <li>(a) Quarterly Reports:</li> <li>April 15 Quarterly I</li> <li>July 15 Quarterly F</li> <li>October 15 Quarter</li> <li>January 31 Year-Er</li> <li>Termination Report</li> </ul>	Report (Q1) Report (Q2) rly Report (Q3) nd Report (YE)	Election on	General (30G)	General (12G) Special (12S)	Runoff (12R) in the State of Special (30S) in the State of
5. Covering Period	M / D D / 4 01	Y Y Y Y 2012	through 0		Y Y Y 2012
I certify that I have examined the Type or Print Name of Treasure	Nancy E Har	-		M M /	plete.
Signature of Treasurer         Name           NOTE:         Submission of false, error	cy E Harrison eous, or incomple	ete information may	[Electronically Filed] subject the person signir	Date	
Office Use Only					EC FORM 3 Revised 02/2003)

07/13/2012 17 : 02

PAGE 1 / 40

Image# 12952424197

6.

7.

8.

9.

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

Schedule C and/or Schedule D) .....

PAGE 2 / 40

#### of Receipts and Disbursements Write or Type Committee Name LA FERLA FOR CONGRESS D D D 04 06 30 2012 01 2012 Report Covering the Period: From: To: COLUMN A COLUMN B This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 26239.94 115540.25 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 500.00 4933.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 25739.94 110607.25 (subtract Line 6(b) from Line 6(a)) ..... Net Operating Expenditures (a) Total Operating Expenditures 28084.82 136793.16 (from Line 17) ..... (b) Total Offsets to Operating 194.58 318.61 Expenditures (from Line 14)..... (c) Net Operating Expenditures 27890.24 136474.55 (subtract Line 7(b) from Line 7(a)) ..... Cash on Hand at Close of 151.33 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on

#### For further information contact:

26824.88

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

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

Image# 12952424199		
	DETAILED SUMMARY PAGE	
FEC Form 3 (Revised 12/2003)	of Receipts	PAGE 3 / 40
Write or Type Committee Name		
LA FERLA FOR CONGRESS		
M	M / D D / Y Y Y	M = M / D = D / Y = Y = Y = Y
	04 01 2012 To:	06 30 2012
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)	7000.00	62825.00
(ii) Unitemized	2710.00	27769.18
(iii) TOTAL of contributions from individuals	9710.00	90594.18
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	1500.00	6500.00
(d) The Candidate	15029.94	18446.07
(e) TOTAL CONTRIBUTIONS		, , , , , , , , , , , , , , , , , , ,
(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	26239.94	115540.25
12. TRANSFERS FROM OTHER		
AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the	0.00	32664.70
Candidate		32004.70
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS		
(add Lines 13(a) and (b))	0.00	32664.70
14. OFFSETS TO OPERATING		
EXPENDITURES	194.58	318.61
(Refunds, Rebates, etc.)	7 7 7	510.01
15. OTHER RECEIPTS		
(Dividends, Interest, etc.)	0.00	0.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15)		
(Carry Total to Line 24, page 4)	26434.52	148523.56

of Disbursements PAGE 4 / 40 FEC Form 3 (Revised 02/2003) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 28084.82 136793.16 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 5000.00 6646.07 by the Candidate..... 0.00 0.00 (b) Of All Other Loans ..... (c) TOTAL LOAN REPAYMENTS 5000.00 6646.07 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 500.00 4933.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) ..... (d) TOTAL CONTRIBUTION REFUNDS 500.00 4933.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS ..... 22. TOTAL DISBURSEMENTS 33584.82 148372.23 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY** 

**DETAILED SUMMARY PAGE** 

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7		7	_	7301.63
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7		7	_	26434.52
25.	SUBTOTAL (add Line 23 and Line 24)	Γ.	7		7	-	33736.15
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	Γ.	7		7	-	33584.82
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7	_	151.33

<b>IT</b> An				FOR LINE NUMBER:       PAGE       5       OF       40         (check only one)       Image: Second Seco
	NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Ms O Marie Anderson Mailing Address 919 N. Meadowview Dr City Chestertown	State MD	Zip Code 21620	Date of Receipt 06 / 07 / 2012 Transaction ID : SA11AI.5459
	FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: 2012	C Occupation Retired		Amount of Each Receipt this Period
_	Primary General Other (specify)		ycle-to-Date 500.00	
в.	Full Name (Last, First, Middle Initial) Valerie Arkoosh Mailing Address 530 Spring Lane			Date of Receipt
	City Wyndmoor	State PA	Zip Code 19038	Transaction ID : SA11AI.5395
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer University of Penn. Receipt For: 2012 Primary General Other (specify)	Occupation Physician Election C	ycle-to-Date	Primary Debt Relief
c.	C. Full Name (Last, First, Middle Initial) Margie Baker Mailing Address 220 Calvert Street City State		Zip Code	Date of Receipt
	Chestertown FEC ID number of contributing federal political committee.	MD	21620	Amount of Each Receipt this Period
	Name of Employer Retired Receipt For: 2012 Primary General Other (specify)	Occupation Retired Election C	ycle-to-Date 225.00	75.00
	UBTOTAL of Receipts This Page (optional)			1525.00

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         6         0F         40           (check only one)         X         11a         11b         11c         11d           12         13a         13b         14         15		
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS					
۲ ۸.	Full Name (Last, First, Middle Initial) Richard Berkowitz			Date of Receipt		
	Mailing Address 1075 Park Avenue 4A	Aailing Address 1075 Park Avenue 4A				
	City New York	State NY	Zip Code 10128	04 03 2012 Transaction ID : SA11AI.5375		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer Self	Occupation Medical Do				
	Receipt For: 2012	Election C	ycle-to-Date			
	Primary General Other (specify)		250.00	]		
В.	Full Name (Last, First, Middle Initial)			Date of Receipt		
0.	Mailing Address 450 Marion Way			05 29 2012		
	City Palo Alto	State CA	Zip Code 94301	Transaction ID : SA11AI.5456		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer	Occupation	1			
	Permanente Medical Group Receipt For: 2012	Physician				
	Primary General Other (specify)		ycle-to-Date 250.00	1		
_	Full Name (Last, First, Middle Initial) Sandra Bjork			Date of Receipt		
C.	Mailing Address 110 Birch Run Rd			05 29 2012		
	City Chestertown	State MD	Zip Code 21620	Transaction ID : SA11AI.5449		
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period		
	Name of Employer	Occupation	1	75.00		
	None Not			_		
	Receipt For: 2012 Primary General Other (specify)		ycle-to-Date 275.00	1		
s	UBTOTAL of Receipts This Page (optional)			375.00		
F	OTAL This Period (last page this line number of					

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Statements m	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NI (check only of 11a 12	one) 11b 13a	PAGE	7 OF	40 15
	NAME OF COMMITTEE (In Full)							
<b>A</b> .	Full Name (Last, First, Middle Initial) Thomas Brown Mailing Address 4241 North Sand Rd			Date of R	Receipt	/	YYY	
	City Hershey	State NE	Zip Code 69143	04 Transaction	13 n ID : SA11		2012	
	FEC ID number of contributing federal political committee.	С		Amount o	of Each Reco	eipt this	Period 250.00	
	Name of Employer Self Receipt For: 2012 Primary General Other (specify)	Occupation Farmer Election C	n ycle-to-Date 250.00	Primary De	Pot Relief		230.00	,
в.	Full Name (Last, First, Middle Initial) Robert Bryan Jr. Mailing Address 13761 Shallcross Wharf			Date of R	Receipt	/ Y Y	(	1
	City Kennedyville	State MD	Zip Code 21645	06 Transaction	29 1 ID : SA11A		2012	
	FEC ID number of contributing federal political committee.	С		Amount c	of Each Rec	eipt this	Period	_
	Name of Employer Retired	Occupation Retired		_ L	- <del>y</del>		100.00	0
	Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 350.00	1				
c.	Full Name (Last, First, Middle Initial) Avis Carr Mailing Address 861 Washington Ave #212			Date of R				_
	City		Zip Code 21620	04 Transactio	n ID : SA11	2	2012	
	Chestertown           FEC ID number of contributing federal political committee.	C		Amount c	of Each Rec	eipt this		
	Name of Employer none Receipt For: 2012	Occupation None Election C	n ycle-to-Date	- L		,	250.00	0
_	Primary General Other (specify)		250.00	]				
5	UBTOTAL of Receipts This Page (optional)					,	600.00	)
1	OTAL This Period (last page this line number	only)						

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 8 OF 40 (check only one)			
		Detailed Summary Page	X 11a 11b 11c 11d				
				12     13a     13b     14     15       person for the purpose of soliciting contributions       ee to solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
Α.	Full Name (Last, First, Middle Initial) Margaret Cook			Date of Receipt			
Λ.	Mailing Address 206 Birch Run Rd			05 22 2012			
	City Chestertown	State MD	Zip Code 21620	Transaction ID : SA11AI.5424			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
	Name of Employer Retired	Occupation Retired	1	500.00			
	Receipt For: 2012	Election Cy	ycle-to-Date				
	Primary General Other (specify)		500.00				
В.	Full Name (Last, First, Middle Initial) Mark Glaze			Date of Receipt			
υ.	Mailing Address 200 Touhey Dr		M M / D D / Y Y Y Y 04 03 2012				
	City Stevensville	State MD	Zip Code 21666	Transaction ID : SA11AI.5377			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
	Name of Employer	Occupation	1	250.00			
	Dept of Transportation	Air Quality S	Specialist				
	Receipt For: 2012	Election Cy	vcle-to-Date				
	Primary   General     Other (specify)		250.00	]			
_	Full Name (Last, First, Middle Initial)			Date of Receipt			
C.	Mailing Address 855 High Street			06 19 2012			
	City	State	Zip Code	Transaction ID : SA11AI.5463			
	Chestertown	MD	21620				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Self		Occupation	1	50.00			
		Physician		_			
	Receipt For: 2012	Election Cy	ycle-to-Date	_			
	Other (specify)		, 300.00				
s	UBTOTAL of Receipts This Page (optional)			800.00			
Т	OTAL This Period (last page this line number of	only)					

SCHEDULE A (FEC Form 3)				FOR LINE NUMBER: PAGE 9 OF 40 (check only one)				
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the					
		Detailed Summary Page	12 $13a$ $13b$ $14$ $15$					
Ar	v information copied from such Reports and S	Statements m	av not be sold or used by any i	person for the purpose of soliciting contributions				
				ee to solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
<u>А</u> .	Full Name (Last, First, Middle Initial) Kenneth Herlihy			Date of Receipt				
	Mailing Address 14006 Huyettt Lane	06 19 2012						
	City	State	Zip Code	Transaction ID : SA11AI.5462				
	Galena	MD	21635					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
	Name of Employer	Occupation	1	250.00				
	Retired	Retired						
	Receipt For: 2012	Election C	ycle-to-Date					
	Primary General		775.00	1				
			, ,	1				
В.	Full Name (Last, First, Middle Initial) Martha Holland			Date of Receipt				
р.	Mailing Address 212 Birch Run Rd	04 26 2012						
	City	State	Zip Code					
	Chestertown	MD	21620	Transaction ID : SA11AI.5410				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
				250.00				
	Name of Employer	Occupatior	1					
	Retired	Retired		Primary Debt Relief				
	Receipt For: 2012	Election C	ycle-to-Date					
	Other (specify)		250.00					
_	Full Name (Last, First, Middle Initial)							
C.	Tonya Jarvis			Date of Receipt				
	Mailing Address 22681 Bella Rita Circle			05 22 2012				
	City	State	Zip Code	Transaction ID : SA11AI.5428				
	Boca Raton	FL	33433					
	FEC ID number of contributing	C		Arrewat of Each Descipt this Devial				
	federal political committee.	С		Amount of Each Receipt this Period				
	Name of Employer	Occupation	1	1000.00				
· · ·		Retired						
	Receipt For: 2012	Election C	ycle-to-Date					
Primary General			4000.00	1				
Other (specify)			1000.00	1				
Г								
s	UBTOTAL of Receipts This Page (optional)			1500.00				
T	<b>OTAL</b> This Period (last page this line number of	only)						

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Notomonto	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:     PAGE     10     OF     40       (check only one)     11a     11b     11c     11d       12     13a     13b     14     15		
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.		
A. Full Name (Last, First, Middle Initial) Mailing Address PO BOx 400 City		State	Zip Code	Date of Receipt		
	Crumpton	MD	21628	Transaction ID : SA11AI.5431		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer Self	Occupation Medical Do				
	Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 350.00	]		
в.	Full Name (Last, First, Middle Initial) William Lindsay Mailing Address 201 Richard Drive			Date of Receipt		
				05 22 2012		
	City Chestertown	State MD	Zip Code 21620	Transaction ID : SA11AI.5432		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer	Occupation	1			
	none	none		_		
	Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 300.00	1		
	Full Name (Last, First, Middle Initial)			Data of Descipt		
C.	Marty Saulenas Mailing Address 22681 Bella Rita Circle			Date of Receipt		
	City	State	Zip Code	Transaction ID : SA11AI.5426		
	Boca Raton	FL	33433			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
Sunbeam not s		Occupation		1000.00		
		not supplie				
	Primary General Other (specify)	Election C	ycle-to-Date 1000.00	1		
s	UBTOTAL of Receipts This Page (optional)			1150.00		
Т	OTAL This Period (last page this line number	only)		, ,		

I

				FOR LINE NUMBER: PAGE 11 OF 40				
SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)				
		for each category of the Detailed Summary Page	X 11a 11b 11c 11d					
		Detailed Summary Page	12 13a 13b 14 15					
	ny information copied from such Reports and St for commercial purposes, other than using the			person for the purpose of soliciting contributions ee to solicit contributions from such committee.				
$\left \right\rangle$	NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS							
/								
	Full Name (Last, First, Middle Initial) Christina Showalter			Data of Descipt				
Α.	Mailing Address 126 North Queen St			Date of Receipt				
	City	State	Zip Code	Transaction ID : SA11AI.5437				
	Chestertown	MD	21620					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
	Name of Employer Retired	Occupation Retired	1	100.00				
	Receipt For: 2012		ycle-to-Date					
	Primary General		yoie-iu-Dale					
	Other (specify)		400.00	]				
В.	Full Name (Last, First, Middle Initial)			Date of Receipt				
Б.	Mailing Address 329 Fords Landing Lane	M M / D D / Y Y Y Y 05 29 2012						
	City	State	Zip Code	Transaction ID : SA11AI.5452				
	Millington	MD	21651					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
	Name of Employer	Occupation	1					
	Retired	Retired						
	Receipt For: 2012	Election C	ycle-to-Date					
	Primary General			1				
	Other (specify)		300.00	1				
_	Full Name (Last, First, Middle Initial)			Date of Receipt				
C.	Mailing Address PO Box 159							
	PO Box 159			04 30 2012				
	City	State	Zip Code	Transaction ID : SA11AI.5417				
	Oxford	MD	21654					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
	Name of Employer	Occupation	1	500.00				
	Retired	Retired		Primary Debt Relief				
	Receipt For: 2012	Election C	ycle-to-Date					
Primary General				1				
	Other (specify)		500.00	1				
S	UBTOTAL of Receipts This Page (optional)			900.00				
F				- , , , ,				
ד	OTAL This Period (last page this line number or	nly)		, ,				

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         12         OF         40           (check only one)
Ar or	ny information copied from such Reports and r for commercial purposes, other than using the	Statements mane and	nay not be sold or used by any address of any political committed	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
<u>А</u> .	Full Name (Last, First, Middle Initial) Thomas Timberman			Date of Receipt
	Mailing Address 217 Mt. Vernon Ave			05 22 2012
	City Chestertown	State MD	Zip Code 21620	Transaction ID : SA11AI.5430
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer US Govt	Occupation Consultant		
	Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 250.00	]
в.	Full Name (Last, First, Middle Initial) Mailing Address			Date of Receipt
	City	State	Zip Code	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify)		ycle-to-Date	]
_	Full Name (Last, First, Middle Initial)			
C.	Mailing Address			Date of Receipt
	City	State	Zip Code	
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer		Occupation	1	
	Receipt For: Primary General Other (specify)	Election C	ycle-to-Date	]
	SUBTOTAL of Receipts This Page (optional)			150.00
1	<b>OTAL</b> This Period (last page this line number	only)		7000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Statements m	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       13       OF       40         (check only one)       11a       11b       11c       11d         12       13a       13b       14       15         person for the purpose of soliciting contributions
				ee to solicit contributions from such committee.
A. Full Name (Last, First, Middle Initial) Mailing Address PO Box 776		mmitttee		Date of Receipt
	City Chestertown	State MD	Zip Code 21620	05         11         2012           Transaction ID : SA11C.5420
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	ı	500.00
	Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 500.00	
в.	Full Name (Last, First, Middle Initial) PLANNED PARENTHOOD ACTIO Mailing Address 434 WEST 33RD STREET	ON FUND	INC	Date of Receipt
	City NEW YORK	State NY	Zip Code 10001	Transaction ID : SA11C.5369
	FEC ID number of contributing federal political committee.	С ст	0004148	Amount of Each Receipt this Period
	Name of Employer	Occupation	1	1000.00
	Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
C.	C. Mailing Address		Zip Code	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer		Occupation	1	
	Receipt For: Primary General Other (specify)	· · · ·	ycle-to-Date	
s	UBTOTAL of Receipts This Page (optional)			1500.00
T	OTAL This Period (last page this line number	only)		1500.00

	3) Use separate schedule(s) for each category of the Detailed Summary Page s and Statements may not be sold or used by any p sing the name and address of any political committee	
NAME OF COMMITTEE (In Full)	SS	
A. Full Name (Last, First, Middle Initial) Mailing Address 209 BIRCH RUN ROA		Date of Receipt
City CHESTERTOWN	StateZip CodeMD21620	Transaction ID : SA11D.5359
FEC ID number of contributing federal political committee.	C H2MD01154	Amount of Each Receipt this Period
Name of Employer Corsica Womens Health	Occupation Physician	15000.00
Receipt For: 2012 Primary General Other (specify)	Election Cycle-to-Date 51080.83	
Full Name (Last, First, Middle Initial) Dr. JOHN JAMES DR J LA F Mailing Address 209 BIRCH RUN ROAI		Date of Receipt
	City State Zip Code	
FEC ID number of contributing federal political committee.	С Н2МD01154	Amount of Each Receipt this Period
Name of Employer Corsica Womens Health	Occupation Physician	14.97
Receipt For: 2012 Primary General Other (specify)	Election Cycle-to-Date 51095.80	
Full Name (Last, First, Middle Initial) Dr. JOHN JAMES DR J LA		Date of Receipt
Mailing Address 209 BIRCH RUN ROA		06 / Y Y Y Y Y 2012
City CHESTERTOWN	StateZip CodeMD21620	Transaction ID : SA11D.5493
FEC ID number of contributing federal political committee.	С н2МD01154	Amount of Each Receipt this Period
Name of Employer Corsica Womens Health Receipt For: 2012	Occupation Physician Election Cycle-to-Date	In-kind - web hosting service paid directly by candic
Primary General Other (specify)	51110.77	
SUBTOTAL of Receipts This Page (option	nal)	15029.94
TOTAL This Period (last page this line n	umber only)	15029.94

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	/ of the y Page	FOR LINE NUMBER:         PAGE         15         OF         40           (check only one)         X         17         18         19a         19b           20a         20b         20c         21
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Act Blue Mailing Address 14 Arrow Street			Date of Disbursement
	Suite 11       City     State       Cambridge     MA       Purpose of Disbursement     processing fees for April	Zip Code 02138		Amount of Each Disbursement this Period 59.26
	Candidate Name LA FERLA FOR CONGRESS Office Sought: House Senate President State: MD District: 01 Disbursement For. Disbursement Disbursement Disbursement Disbursement Disbursement For. Disbursement D	General	Category/ Type	
в.	Full Name (Last, First, Middle Initial)       George Connelly       Mailing Address     411 Washington Street			Date of Disbursement
	City     State       Chestertown     MD       Purpose of Disbursement Finance Consultant and reimbursable expenses       Candidate Name       LA FERLA FOR CONGRESS	Zip Code 21620	001 Category/ Type	Amount of Each Disbursement this Period 2143.69 Transaction ID : SB17.5336
	Office Sought:       X       House       Disbursement Formation         Senate       President       X       Primary         State:       MD       District:       01	General	iypo	
C.	Full Name (Last, First, Middle Initial) Delmarva Power Mailing Address 1613 North Salisbury Blvd			Date of Disbursement
		p Code 1801	· · ·	Amount of Each Disbursement this Period 81.01
	Candidate Name LA FERLA FOR CONGRESS Office Sought: Senate President State: MD District: 01 Disbursement For	General	Category/ Type	Transaction ID : SB17.5479
	UBTOTAL of Disbursements This Page (optional)			2283.96

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	/ of the	FOR LINE NUMBER:         PAGE         16         OF         40           (check only one)         X         17         18         19a         19b           20a         20b         20c         21
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS			
Α.				Date of Disbursement
	Mailing Address 1613 North Salisbury Blvd			04 19 2012
	City     State       Salisbury     MD       Purpose of Disbursement     Vertice	Zip Code 21801		Amount of Each Disbursement this Period 61.12
	Candidate Name LA FERLA FOR CONGRESS		001 Category/ Type	Transaction ID : SB17.5333
	Office Sought: House Disbursement For Senate President Other (s	General		
В.	Full Name (Last, First, Middle Initial) Johnson Fortenbaugh			Date of Disbursement
	Mailing Address 357 High Street			04 / D D / Y Y Y Y 04 13 2012
	City         State           Chestertown         MD	Zip Code 21620		Amount of Each Disbursement this Period
	Purpose of Disbursement Rent Candidate Name		001	150.00 Transaction ID : SB17.5337
	LA FERLA FOR CONGRESS	. 2012	Category/ Type	
	Office Sought: X House Disbursement For Senate President Other (s State: MD District: 01	General		
C.	Full Name (Last, First, Middle Initial) Dr. JOHN JAMES DR J LA FERLA			Date of Disbursement
	Mailing Address       209 BIRCH RUN ROAD         City       State       Zip Code         CHESTERTOWN       MD       21620			06 29 2012
				Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind - web hosting service paid directly by candidate			14.97
Candidate Name		Category/ Type	Transaction ID : SB17.5494	
	Office Sought: House Disbursement For Senate President Other (s State: MD District: 01	General		
s	UBTOTAL of Disbursements This Page (optional)			226.09
	OTAL 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         17         OF         40           X         17         18         19a         19b           20a         20b         20c         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) LA FERLA FOR CONGRESS						
Α.	Full Name (Last, First, Middle Initial) Main Street Business Solutions Inc.			Date of Disbursement			
	Mailing Address 102 Chester Village			04 18 2012			
	City State Chester MD	Zip Code 21619		Amount of Each Disbursement this Period 2400.00			
	Purpose of Disbursement Compliance Services Candidate Name		001	Transaction ID : SB17.5353			
	LA FERLA FOR CONGRESS	2012	Category/ Type	, 			
	Office Sought: House Disbursement Formary President Other (s	General					
	Full Name (Last, First, Middle Initial)						
В.	Main Street Business Solutions Inc.			Date of Disbursement			
	Mailing Address 102 Chester Village			04 19 2012			
	City State Chester MD	Zip Code 21619		Amount of Each Disbursement this Period			
	Purpose of Disbursement Compliance Services		001	1087.50 Transaction ID : SB17.5338			
	Candidate Name LA FERLA FOR CONGRESS		Category/ Type				
	Office Sought: House Disbursement Formary President State: MD District: 01	General					
_	Full Name (Last, First, Middle Initial) Main Street Business Solutions Inc.			Date of Disbursement			
C.	Mailing Address 102 Chester Village			M M / D D / Y Y Y Y 06 03 2012			
		o Code 1619		Amount of Each Disbursement this Period			
	Purpose of Disbursement compliance consultant	1013		608.55			
	Candidate Name LA FERLA FOR CONGRESS		Category/ Type	Transaction ID : SB17.5472			
	Office Sought:     House     Disbursement Formation       Senate     President     Primary       Other (s     Other (s	General					
s	UBTOTAL of Disbursements This Page (optional)			4096.05			
Т	OTAL This Period (last page this line number only)			<u> </u>			

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each categor Detailed Summar	y of the	FOR LINE NUMBER: (check only one)         PAGE         18         OF         40           X         17         18         19a         19b           20a         20b         20c         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) LA FERLA FOR CONGRESS						
Α.	Full Name (Last, First, Middle Initial) Main Street Business Solutions Inc.			Date of Disbursement			
А.				M M / D D / Y Y Y Y			
	Mailing Address 102 Chester Village			06 29 2012			
	City State Chester MD	Zip Code 21619		Amount of Each Disbursement this Period			
	Purpose of Disbursement compliance work	21019	001	322.50			
	Candidate Name LA FERLA FOR CONGRESS		Category/	Transaction ID : SB17.5502			
	Office Sought: House Disbursement For	2012	Туре				
	Senate Primary President Other (s	General (pecify)					
	State: MD District: 01						
В.	Full Name (Last, First, Middle Initial) Mr. Thomas Martin			Date of Disbursement			
υ.	Mailing Address 112 Cross Street						
				04 13 2012			
	City State Chestertown MD	Zip Code 21620		Amount of Each Disbursement this Period			
	Purpose of Disbursement reimburse travel expenses		002	750.00			
	Candidate Name LA FERLA FOR CONGRESS		Category/ Type	Transaction ID : SB17.5360			
	Office Sought: House Disbursement For Senate President Other (s State: MD District: 01	General	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Full Name (Last, First, Middle Initial)						
C.	Mr. Thomas Martin			Date of Disbursement			
	Mailing Address 112 Cross Street						
		o Code 1620		Amount of Each Disbursement this Period			
	Purpose of Disbursement Campaign management services		001	1250.00			
	Candidate Name LA FERLA FOR CONGRESS		Category/	Transaction ID : SB17.5361			
	Office Sought: House Disbursement For Senate President Other (s	General	Туре				
Г	State: MD District: 01						
s	UBTOTAL of Disbursements This Page (optional)						
Т	OTAL This Period (last page this line number only)						

ITEMIZED DISBURSEMENTS		I I I I I I I I I I I I I I I I I I I		FOR LINE NUMBER: (check only one)         PAGE         19         OF         40           X         17         18         19a         19b           20a         20b         20c         21
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas Martin Mailing Address 112 Cross Street			Date of Disbursement
	City     State       Chestertown     MD       Purpose of Disbursement Reimburse Travel Expenses     MD	Zip Code 21620	002	Amount of Each Disbursement this Period
	Candidate Name LA FERLA FOR CONGRESS Office Sought: House Disbursement For Senate President Other (s	General	Category/ Type	Transaction ID : SB17.5363
в.	State:       MD       District:       01         Full Name (Last, First, Middle Initial)       Paradee Gas Co.         Mailing Address       28541 John J. Williams Hwy			Date of Disbursement
	City     State       Millsboro     DE       Purpose of Disbursement     Candidate Name	Zip Code 19966	Category/	Amount of Each Disbursement this Period 129.55 Transaction ID : SB17.5325
	Office Sought:     House     Disbursement For       Senate     Primary       President     Other (s	General	Туре	
C.	Full Name (Last, First, Middle Initial) Paradee Gas Co. Mailing Address 28541 John J. Williams Hwy			Date of Disbursement
	-	p Code 9966	001	Amount of Each Disbursement this Period 110.47 Transaction ID : SB17.5339
	Calificate Name         LA FERLA FOR CONGRESS         Office Sought:       House       Disbursement For         Senate       President       Other (s         State:       MD       District:       01	General	Category/ Type	
s	UBTOTAL of Disbursements This Page (optional)			1448.02
Т	OTAL This Period (last page this line number only)			

ITEMIZED DISBURSEMENTS for each c		Use separate sch for each category Detailed Summar	/ of the	FOR LINE NUMBER: (check only one)         PAGE         20         OF         40           X         17         18         19a         19b           20a         20b         20c         21
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Postmaster Mailing Address 104 Spring Ave.			Date of Disbursement
	City     State       Chestertown     MD       Purpose of Disbursement     Postage	Zip Code 21620	001	Amount of Each Disbursement this Period 117.00 Transaction ID : SB17.5468
	Candidate Name LA FERLA FOR CONGRESS Office Sought: MD District: 01 Candidate Name Disbursement For Senate President Other (s	General	Category/ Type	
в.	Full Name (Last, First, Middle Initial)         Postmaster         Mailing Address       104 Spring Ave.			Date of Disbursement
	City     State       Chestertown     MD       Purpose of Disbursement     MD       Postage     Candidate Name       LA FERLA FOR CONGRESS	Zip Code 21620	Category/ Type	Amount of Each Disbursement this Period 47.00 Transaction ID : SB17.5469
	Office Sought:     X     House     Disbursement For       Senate     President     X     Primary       State:     MD     District:     01	General		
C.	Full Name (Last, First, Middle Initial)         Sharp Political Consulting LLC         Mailing Address       PO Box 334			Date of Disbursement
	Strawsburg         VA         2           Purpose of Disbursement Campaign Finance Consulting Services	p Code 2657		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.5474
	Candidate Name LA FERLA FOR CONGRESS Office Sought: House Senate President State: MD District: 01 Disbursement For Other (s	General	Category/ Type	
s	UBTOTAL of Disbursements This Page (optional)			2164.00
Т	OTAL This Period (last page this line number only)			

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	fo	Jse separate sch or each category Detailed Summar	of the	FOR LINE NUMBER: (check only one)         PAGE         21         OF         40           X         17         18         19a         19b         19b         20a         20b         20c         21
	ny information copied from such Reports and Statemer for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS				
Α.	Full Name (Last, First, Middle Initial) Tru Blu Politics				Date of Disbursement
	Mailing Address 5570 Sterrett Place Suite 300 City Stat	e.	Zip Code		04     03     2012       Amount of Each Disbursement this Period
	Columbia MD Purpose of Disbursement Robo Call		21044		2100.00
	Candidate Name LA FERLA FOR CONGRESS			003 Category/ Type	Transaction ID : SB17.5347
		t For: 2 mary ner (spec	General		
в.	Full Name (Last, First, Middle Initial) Tru Blu Politics				Date of Disbursement
	Mailing Address 5570 Sterrett Place Suite 300 City Stat		Zip Code		04 / D D / Y Y Y Y 02012
	Columbia MD Purpose of Disbursement		21044		Amount of Each Disbursement this Period 5663.20
	debt reduction: mail piece Candidate Name LA FERLA FOR CONGRESS			003 Category/ Type	Transaction ID : SB17.5516
		t For: 2 mary ner (spec	2012 General cify)		
C.	Full Name (Last, First, Middle Initial) Tru Blu Politics				Date of Disbursement
	Mailing Address 5570 Sterrett Place Suite 300				
	City     State       Columbia     MD       Purpose of Disbursement	Zip C 2104			Amount of Each Disbursement this Period 5000.00
	debt reduction: campaign consulting         Candidate Name         LA FERLA FOR CONGRESS         Office Sought:       Y House         Disbursemen	t For: 2	2012	003 Category/ Type	Transaction ID : SB17.5512
_	Senate X Pri	mary ner (spec	General		
s	UBTOTAL of Disbursements This Page (optional)				12763.20
т	OTAL This Period (last page this line number only)				L , ,

<b>IT</b> An	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS		y of the y Page used by any	
<b>A</b> .	LA FERLA FOR CONGRESS         Full Name (Last, First, Middle Initial)         Tru Blu Politics         Mailing Address 5570 Sterrett Place         Suite 300         City         Columbia         Purpose of Disbursement         debt reduction: website services         Candidate Name	Zip Code 21044	003 Category/	Date of Disbursement 05 29 2012 Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.5513
	LA FERLA FOR CONGRESS         Office Sought:       House         Senate       President         President       Other (specified)         State:       MD       District:       01         Full Name (Last, First, Middle Initial)       Full Name (Last, First, Middle Initial)       Full Name (Last, First, Middle Initial)       Full Name (Last, First, Middle Initial)	General	Туре	
B.	UPS Store           Mailing Address         861 Washington Ave           City         State           Chestertown         MD	Zip Code 21620		Date of Disbursement
	Purpose of Disbursement administrative - copies, mailing Candidate Name LA FERLA FOR CONGRESS Office Sought: House Disbursement For: Senate President Other (st	General	001 Category/ Type	94.93 Transaction ID : SB17.5348
с.	Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 920041 City State Zip	General	001 Category/ Type	Date of Disbursement M M / D D / Y Y Y Y 2012 Amount of Each Disbursement this Period 209.73 Transaction ID : SB17.5354
	UBTOTAL of Disbursements This Page (optional)			

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS y information copied from such Reports and Statements m	Use separate sc for each categor Detailed Summa	y of the ry Page	FOR LINE NUMBER:     PAGE     23     OF     40       (check only one)     X     17     18     19a     19b       20a     20b     20c     21
	NAME OF COMMITTEE (In Full)			
Α.	Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 920041			Date of Disbursement
	City State Dallas TX Purpose of Disbursement	Zip Code 75392		Amount of Each Disbursement this Period 165.74
	final phone bill Candidate Name LA FERLA FOR CONGRESS Office Sought: X House Senate Disbursement For: X Primary	: 2012 General	001 Category/ Type	Transaction ID : SB17.5355
— B.	Other (s         State:       MD       District:       01         Full Name (Last, First, Middle Initial)       Beilin Zia			Date of Disbursement
	Mailing Address 379 Cypress St City State Millington MD Purpose of Disbursement	Zip Code 21651		06     30     2012       Amount of Each Disbursement this Period       150.00
	social media updating           Candidate Name           LA FERLA FOR CONGRESS           Office Sought:         House         Disbursement For           Senate         Primary         Primary           Other (s         Other (s	General	001 Category/ Type	Transaction ID : SB17.5500
C.	State:     MD     District:     01       Full Name (Last, First, Middle Initial)       Mailing Address			Date of Disbursement
City State Zip Code Purpose of Disbursement Candidate Name				Amount of Each Disbursement this Period
	Office Sought: House Disbursement For Senate Primary President Other (s State: District:	General	Category/ Type	
s	UBTOTAL of Disbursements This Page (optional)			315.74
	OTAL This Period (last page this line number only)			27924.22

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee.         NAME OF COMMITTEE (in Full)         LA FERLA FOR CONGRESS         Full Name (Last, First, Middle Initial)         A Dr. JOHN JAMES DR J LA FERLA         Mailing Address 209 BIRCH RUN ROAD         City         City         City         Chest State         Purpose of Disbursement         Tope of Disbursement         State         Conditate Name         Category/         Type         Office Sought:         B.         Mailing Address         City         State         Office Sought:         Purpose of Disbursement         District:         Office Sought:         Purpose of Disbursement         City         State:         District:         Disbursement         City         Full Name (Last, First, Middle Initial)         B.         Mailing Address         City         State:         Disbursement         City         State <t< th=""><th></th><th>CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS</th><th>Use separate sc for each categor Detailed Summa</th><th>y of the ry Page</th><th>FOR LINE NUMBER: (check only one)     PAGE     24     OF     40       17     18     19a     19b       20a     20b     20c     21</th></t<>		CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sc for each categor Detailed Summa	y of the ry Page	FOR LINE NUMBER: (check only one)     PAGE     24     OF     40       17     18     19a     19b       20a     20b     20c     21
A. Dr. JOHN JAMES DR J LA FERLA       Date of Disbursement         Mailing Address       209 BIRCH RUN ROAD         City       State       Zip Code         City       State       Zip Code         Purpose of Diabursement       Disbursement For:       2012         Amount of Each Disbursement       5000.00         Transaction ID : SB19A.5465       Transaction ID : SB19A.5465         Office Sought:       House       Disbursement For:         State:       MD Disbursement For:       2012         Full Name (Last, First, Middle Initial)       Date of Disbursement this Period         B.       Mailing Address       Amount of Each Disbursement this Period         City       State       Zip Code         Purpose of Diabursement       Other (specify)       Amount of Each Disbursement this Period         City       State       Zip Code         Purpose of Diabursement       Disbursement For:       Type         Office Sought:       House       Disbursement For:       Disbursement         State:       Disbursement       Category/ Type       Amount of Each Disbursement this Period         Griftor Sought:       House       Disbursement For:       Type         Mailing Address       City Other (specify)       Amount of Each D		for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS			
CHESTERTOWN     MD     21620       Purpose of Disbursement respin (and candidate Name     5000.00       Candidate Name     Category/ Primary     Category/ Type       Office Sought:     House Senate     Disbursement For: 2012 Other (specify)       Full Name (Last, First, Middle Initial)     Date of Disbursement Inis Period       B.     Mailing Address       City     State       Office Sought:     House President       Disbursement     Disbursement For: Category/ Type       Office Sought:     House President       State:     Disbursement For: State:       City     State       Zip Code     Amount of Each Disbursement this Period       Full Name (Last, First, Middle Initial)     Date of Disbursement this Period       City     State     Disbursement For: Other (specify)       State:     Disbursement For: Category/ Type     Date of Disbursement this Period       City     State     Zip Code       Mailing Address     City     State       City     State     Zip Code       Purpose of Disbursement     Category/ Type       Office Sought:     House President     Disbursement For: Category/ Type       Office Sought:     House President     Disbursement For: President       State:     Disbursement For: President     Category/ Type <th>А.</th> <th>Dr. JOHN JAMES DR J LA FERLA</th> <th></th> <th></th> <th></th>	А.	Dr. JOHN JAMES DR J LA FERLA			
Candidate Name       Category/ Type       Transaction ID : SB19A.5465         Office Sought:       House Senate President       Disbursement For: 2012 Senate President       Disbursement For: 2012 (Ther (specify))         B.       Date of Disbursement         Mailing Address       City       State       Zip Code         Purpose of Disbursement       Disbursement For: Senate       Disbursement For: Category/ Type       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: Senate       Category/ Type       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: Senate       Category/ Type       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: Senate       Category/ Type       Date of Disbursement         Full Name (Last, First, Middle Initia)       C       Date of Disbursement       Date of Disbursement         City       State       Zip Code       Amount of Each Disbursement this Period         Purpose of Disbursement       Category/ Type       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: Senate       Category/ Type       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: Senate       Category/ T		CHESTERTOWN MD Purpose of Disbursement			5000.00
State: MD   District: 01   Full Name (Last, First, Middle Initia)   B.   Mailing Address   City State   Zip Code   Purpose of Disbursement   Candidate Name   Office Sought:   House   Disbursement For:   State:   District:   Full Name (Last, First, Middle Initia)   C.   Mailing Address   City   State:   Disbursement For:   State:   District:   Full Name (Last, First, Middle Initia)   C.   Mailing Address   City   State:   Disbursement   City   State:   Disbursement   Candidate Name   City   State:   Disbursement   City   State:   Disbursement   Candidate Name   City   State:   Disbursement   Candidate Name   City   State:   Disbursement   Candidate Name   Category/   Type   Office Sought:   House   Disbursement For:   Category/   City   State:   Disbursement   Category/   Type   Office Sought:   House   Disbursement For:   President   Disbursement For:   Primary<		Candidate Name LA FERLA FOR CONGRESS Office Sought: House Disbursement For			
Mailing Address       Mining Address         City       State       Zip Code         Purpose of Disbursement       Amount of Each Disbursement this Period         Category/ Type       Category/ Type         Office Sought:       House         President       Disbursement For:         State:       District:         Full Name (Last, First, Middle Initial)       Date of Disbursement         C.       Mailing Address         City       State         City       State         Purpose of Disbursement       Category/ Type         Office Sought:       House         Disbursement       Category/ Type         Office Sought:       House         Disbursement For:       Category/ Type         Office Sought:       House         Disbursement For:       President         Office Sought:       House         Disbursement For:       Primary         Office Sought:       House         Disbursement For:       President         State:       Disbursement For:         President       Other (specify)         State:       Disbursement For:		State: MD District: 01			
Purpose of Disbursement       Image: Category/ Type         Office Sought:       House         Disbursement For:       Senate         President       Other (specify)         State:       District:         Full Name (Last, First, Middle Initial)       Date of Disbursement         C.       Mailing Address         City       State         Purpose of Disbursement       Image: Category/ Type         City       State         Purpose of Disbursement       Image: Category/ Type         City       State         Purpose of Disbursement       Image: Category/ Type         Office Sought:       House         President       Disbursement For:         Senate       Primary         General       Other (specify)         State:       Disbursement For:         Senate       Primary         General       Other (specify)         State:       Disbursement For:         Senate       Primary         General       Other (specify)         State:       District:	В.				
Office Sought:       House       Disbursement For:         State:       District:         Full Name (Last, First, Middle Initial)       C.         C.       Date of Disbursement         Mailing Address       Image: Category/Type         City       State         Purpose of Disbursement       Category/Type         Amount of Each Disbursement this Period         Purpose of Disbursement       Category/Type         Office Sought:       House         Disbursement For:       Category/Type         Other (specify)       Category/Type         State:       District:			Zip Code		Amount of Each Disbursement this Period
Full Name (Last, First, Middle Initial)       Date of Disbursement         Mailing Address		Office Sought: House Disbursement For Senate Primary	General		
Purpose of Disbursement     Category/ Type       Candidate Name     Category/ Type       Office Sought:     House       Disbursement For:     Senate       President     Other (specify)       State:     District:	C.	Full Name (Last, First, Middle Initial)			
Candidate Name     Category/ Type       Office Sought:     House       Disbursement For:       Senate       President       Other (specify)			p Code		Amount of Each Disbursement this Period
Senate     Primary     General       President     Other (specify)				Category, Type	
5000.00		Senate     Primary       President     Other (s	General		
SUBTOTAL of Disbursements This Page (optional)	s	UBTOTAL of Disbursements This Page (optional)			5000.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS		
Full Name (Last, First, Middle Initial)  A. Bernard Cantor		Date of Disbursement
Mailing Address 2865 Kinsington Circle		04 03 2012
City State Weston FL Purpose of Disbursement refund	Zip Code 33332	Amount of Each Disbursement this Period 500.00
Candidate Name LA FERLA FOR CONGRESS	Catego Type	
State: MD District: 01		
Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City         State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Catego Type	
Office Sought: House Disbursement For Senate Primar President Other State: District:		
Full Name (Last, First, Middle Initial)		Data of Disburgement
C. Mailing Address		Date of Disbursement
City State 2	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Catego Type	
Office Sought: House Disbursement For Senate President Other State: District:	or:	
SUBTOTAL of Disbursements This Page (optional)		
TOTAL This Period (last page this line number only)		500.00

ge# 12952424222							
CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag		PAGE 26 FOR LINE NUMBER: (check only one)	OF 4	
ME OF COMMITTEE (In Full) A FERLA FOR CONG	RESS			Transa	ction ID	) : SC/10.4175	
LOAN SOURCE Full Name Dr. JOHN JAMES DR				[PERSONAL FUNDS]	F	ion: 2012 Primary General	
Mailing Address 209 BIRCH RUN ROAD						Other (specify) $igvee$	
City CHESTERTOWN		State MD	ZIP Code 21620	2			
Original Amount of Loan			Payment To D	Pate Bal	ance Oi	utstanding at Close of	This Pe
<u> </u>	2500.00			0.00		25	00.00
TERMS Date Incurred	ž011 <sup>Y</sup>	M M / D	Date Due	Interest Rat /11/12 Y 0.0		Secure % (apr)	X
List All Endorsers or Guara 1. Full Name (Last, First, Mi		o Loan Sourc		Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7		
2. Full Name (Last, First, Mic	Idle Initial)			Name of Employer			
Mailing Address				Occupation Amount			
City	State	ZIP Code		Guaranteed Outstanding:	7		
3. Full Name (Last, First, Mic	dle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7		
4. Full Name (Last, First, Mic	dle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · ·	
JBTOTALS This Period This F		/)		·		25	00.00

Form/Schedule: SC/10 Transaction ID : SC/10.4175

(Current loan amount of 2500.00 from a balance of 2500.00 has been forgiven)(A previous settlement amount of 2500.00 has been rescinded)

age# 12952424224			
CHEDULE C (FEC Form 3) DANS		Use separate schedu for each category of Detailed Summary Pa	the (check only one) X 13a
ME OF COMMITTEE (In Full) A FERLA FOR CONGRESS	5	Transa	action ID : SC/10.4628
LOAN SOURCE Full Name (Last, Fi Dr. JOHN JAMES DR J LA		[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address 209 BIRCH RUN ROAD			Other (specify)
City CHESTERTOWN		IP Code	
Original Amount of Loan	Cumulative Paymo	ent To Date Bal	lance Outstanding at Close of This Peri
10000.0	00	0.00	10000.00
TERMS         Date Incurred           M02         /         13         /         Y         2012	Date	Due Interest Rat	0 % (apr)
List All Endorsers or Guarantors (if			Yes N
1. Full Name (Last, First, Middle Init	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City S	State ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 n 1
JBTOTALS This Period This Page (op DTALS This Period (last page in this I		· L	10000.00

Form/Schedule: SC/10 Transaction ID : SC/10.4628

(Current loan amount of 10000.00 from a balance of 10000.00 has been forgiven)(A previous settlement amount of 10000.00 has been rescinded)

HEDULE C (FEC Form 3) ANS		Use separate schedule for each category of th Detailed Summary Pag	<sup>ne</sup> (check only one) X 13a
ME OF COMMITTEE (In Full) A FERLA FOR CONGRESS		Transac	tion ID : SC/10.4977
LOAN SOURCE Full Name (Last, Fire Dr. JOHN JAMES DR J LA I			Election: 2012 Primary General
Mailing Address 209 BIRCH RUN ROAD			Other (specify)
City	State ZIP	Code	
CHESTERTOWN	MD 216	20	
Original Amount of Loan	Cumulative Payment	To Date Bala	nce Outstanding at Close of This Perio
3518.63		0.00	3518.63
TERMS Date Incurred	Date D	le Interest Rate	Secured:
$\begin{array}{c} \text{M} \\ $			
List All Endorsers or Guarantors (if			
1. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	y - 1 - y - 1 - 1 - 1
2. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
3. Full Name (Last, First, Middle Initia	I)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initia	1)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 9
<b>IBTOTALS</b> This Period This Page (opt <b>DTALS</b> This Period (last page in this lir			3518.63

Form/Schedule: SC/10 Transaction ID : SC/10.4977

(Current loan amount of 3518.63 from a balance of 3518.63 has been forgiven)(A previous settlement amount of 3518.63 has been rescinded)

HEDULE C (FEC Form 3) ANS		Use separate sch for each category Detailed Summary	of the (check only one) X 13a
ME OF COMMITTEE (In Full) A FERLA FOR CONGRESS		Tra	ansaction ID : SC/10.5123
LOAN SOURCE Full Name (Last, Fir Dr. JOHN JAMES DR J LA	· · · · ·		Election: 2012 Primary General
Mailing Address 209 BIRCH RUN ROAD			Other (specify) ▼
City	State ZIP	Code	
CHESTERTOWN	MD 216	20	
Original Amount of Loan	Cumulative Payment	To Date	Balance Outstanding at Close of This Perio
10000.0		0.00	10000.00
TERMS Date Incurred	Date D	ue Interest	t Rate Secured:
M 03 <sup>M</sup> / D 29 <sup>D</sup> / Y 2012		Y 1/1/20 Y	0.00 % (apr) Ves No
List All Endorsers or Guarantors (if			
1. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Amount Guaranteed Outstanding:	
IBTOTALS This Period This Page (opt DTALS This Period (last page in this line	·		10000.00

Form/Schedule: SC/10 Transaction ID : SC/10.5123

(Current loan amount of 10000.00 from a balance of 10000.00 has been forgiven)(A previous settlement amount of 10000.00 has been rescinded)

age# 12952424230			
CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE     34     OF     40       FOR LINE NUMBER: (check only one)     X     13a       13b
ME OF COMMITTEE (In Full) A FERLA FOR CONGRESS	5	Transaction	ID : SC/10.5125
LOAN SOURCE Full Name (Last, Fi Dr. JOHN JAMES DR J LA		Ele	1
Mailing Address 209 BIRCH RUN ROAD			General Other (specify) ▼
City	State ZIP C	ode	
CHESTERTOWN	MD 21620	)	
Original Amount of Loan	Cumulative Payment T	o Date Balance	Outstanding at Close of This Perio
5000.0	00	5000.00	9.00
TERMS Date Incurred	Date Due	e Interest Rate	Secured:
M03 <sup>M</sup> / D30 <sup>D</sup> / Y 2012	Y M M / D D / Y	1/1/20 <sup>Y</sup> 0.00	(apr)
List All Endorsers or Guarantors (if		News of Earlines	
1. Full Name (Last, First, Middle Init	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · ·
2. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City 5	State ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
4. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City 5	State ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
JBTOTALS This Period This Page (op			0.00 26018.63

Form/Schedule: SC/10 Transaction ID : SC/10.5125

(A previous settlement amount of 5000.00 has been rescinded)

SCHEDULE D (FEC Form 3)			(Use separate	PAGE 36 OF 40
DEBTS AND OBLIGATIONS		schedule(s) for each	FOR LINE NUMBER:	
Excluding Loans				(check only one) 9 X 10
NAME OF COMMITTEE (In Full)				
LA FERLA FOR CONG	RESS			
A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of D website fee	ebt (Purpose):
1+1 Internet Inc.			website let	5
Mailing Address 701 Lee Road Suite 300				
City State	Zip Code			
Chesterbrooke	PA	19087		
Outstanding Balance Beginning This Period			Transactio	on ID : SD10.5285
14.97				
Amount Incurred This Period	Payn	nent This Period	Outstandi	ng Balance at Close of This Period
0.00		14	.97	0.00
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	ebt (Purpose):
Delmarva Power			Utilities	
Mailing Address 1613 North Salisbury Blvd				
City State	Zip Code			
Salisbury	MD	21801		
Outstanding Balance Beginning This Period			Transactio	on ID : SD10.5287
81.01				
Amount Incurred This Period	Payn	nent This Period	Outstandi	ng Balance at Close of This Period
0.00		81	.01	0.00
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of D	ebt (Purpose):
Main Street Business Solutions I				compliance services
Mailing Address 102 Chester Village				
City	State	Zip Code		
Chester	MD	21619		
Outstanding Balance Beginning This Period			Transact	ion ID : SD10.5289
2400.00				
Amount Incurred This Period	Dour	nent This Period	Outstandi	ng Balance at Close of This Period
	Fayi			
0.00		2400		0.00
1) CURTOTAL C This Deviad This Dags (antional)				0.00
1) SUBTOTALS This Period This Page (optional)				7 7 7 7 7 7 7 7
2) TOTALS This Period (last page this line number				<u></u>
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page onl	у)		<del>· · · · · · · · · · · · · · · · · · · </del>
4) ADD 2) and 3) and carry forward to appropriate	line of Summar	y Page (last page o	nly) 🕨	y

FEC	Schedule	п	(Eorm	3)	(Rovisod	02/2003)	
FEC	Schedule	υ	(FOIIII	3)	(neviseu	02/2003)	

CHEDULE D (FEC Form 3)		(Use separate	PAGE 37 OF 40		
DEBTS AND OBLIGATIONS			schedule(s)		
			for each numbered line)	(check only one) 9 X 10	
NAME OF COMMITTEE (In Full)			· · ·		
LA FERLA FOR CONG	RESS				
A. Full Name (Last, First, Middle Initial) of Debtor				Debt (Purpose): ce and reporting services	
Main Street Business Solutions Ir	nc.		Complianc	e and reporting services	
Mailing Address 102 Chester Village					
City State	Zip Code				
Chester	MD	21619			
Outstanding Balance Beginning This Period			Transacti	on ID : SD10.5490	
0.00					
Amount Incurred This Period	Pavr	nent This Period	Outstandi	ng Balance at Close of This Period	
322.50		322.		0.00	
322.30			30	7 7 7	
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor			Debt (Purpose):	
Main Street Business Solutions Ir	nc.		Complianc	e and reporting services	
Mailing Address 102 Chester Village					
City State	Zip Code				
Chester	MD	21619			
Outstanding Balance Beginning This Period			Transacti	on ID : SD10.5491	
0.00					
Amount Incurred This Period	Pour	nent This Period	Outstandi	ng Balance at Close of This Period	
	Fayi				
806.25		0.	00	806.25	
C. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor		Nature of D	Debt (Purpose):	
Paradee Gas Co.			utilities	().	
Mailing Address					
Mailing Address 28541 John J. Williams Hwy					
City	State	Zip Code			
Millsboro	DE	19966			
Outstanding Balance Beginning This Period			Transact	tion ID : SD10.5290	
129.55					
Amount Incurred This Period	Payr	nent This Period	Outstandi	ng Balance at Close of This Period	
0.00		129		0.00	
9 9 9					
•					
1) SUBTOTALS This Period This Page (optional)				, 806.25	
2) TOTALS This Period (last page this line number	only)		•		
				,	
3) TOTAL OUTSTANDING LOANS from Schedule (	C (last page on	у)		- <del> </del>	
4) ADD 2) and 3) and carry forward to appropriate	line of Summa	ry Page (last page or	nly) 🕨		

FEC Schedule D (Form 3) (Revised 02/2003)

SCHEDULE D (FEC Form 3)		(Use separate	PAGE 38 OF 40
DEBTS AND OBLIGATIONS	schedule(s)	FOR LINE NUMBER:	
Excluding Loans	for each numbered line)	(check only one) 9 X 10	
NAME OF COMMITTEE (In Full)			
LA FERLA FOR CONGRES	S		
A. Full Name (Last, First, Middle Initial) of Debtor or Credito Tru Blu Politics	r		ebt (Purpose): ampaign consulting fee
Mailing Address 5570 Sterrett Place Suite 300			
City State Zip Coo Columbia MD	le 21044		
Outstanding Balance Beginning This Period 5000.00		Transactio	on ID : SD10.5012
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	5000.	00	0.00
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tru Blu Politics		Nature of D website de	ebt (Purpose): velopment
Mailing Address 5570 Sterrett Place Suite 300			
City State Zip Coo Columbia MD	le 21044		
Outstanding Balance Beginning This Period		Transactio	on ID : SD10.5013
3500.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	2000.0	00	0.00
C. Full Name (Last, First, Middle Initial) of Debtor or Credito Tru Blu Politics	r		ebt (Purpose): terials, mail piece and postage
Mailing Address 5570 Sterrett Place Suite 300			
City State	Zip Code		
	21044	Transact	ion ID : SD10.5011
Outstanding Balance Beginning This Period 5663.20			
Amount Incurred This Period F	Payment This Period 5663.		ng Balance at Close of This Period 0.00
1) SUBTOTALS This Period This Page (optional)			0.00
2) TOTALS This Period (last page this line number only)			
3) TOTAL OUTSTANDING LOANS from Schedule C (last page	only)		
4) ADD 2) and 3) and carry forward to appropriate line of Sur	imary Page (last page on	ıly) ►	

FEC	Schedule	п	(Form	3)	(Revised	02/2003	١
FEG	Schedule	υ	(гопп	J)	(neviseu	02/2003	,

Form/Schedule: SD10 Transaction ID : SD10.5013

(Current loan amount of 1500.00 from a balance of 1500.00 has been forgiven)

CHEDULE D (FEC Form 3)		(1)	se separate	PAGE 40 OF 40		
EBTS AND OBLIGATIONS		Ś	schedule(s) for each	FOR LINE NUMBER:		
ccluding Loans				(check only one) 9 X 10		
AME OF COMMITTEE (In Full)						
LA FERLA FOR CONGF	RESS					
A. Full Name (Last, First, Middle Initial) of Debtor of	Creditor		Nature of D telephone	ebt (Purpose):		
Verizon			telephone			
Mailing Address PO Box 920041			_			
City State	Zip Code		-			
Dallas	TX 753	92				
Outstanding Balance Beginning This Period			Transactio	on ID : SD10.5291		
209.73						
Amount Incurred This Period	Payment This	Period	Outstandir	ng Balance at Close of This Period		
0.00		209.73		0.00		
B. Full Name (Last, First, Middle Initial) of Debtor or	Creditor		Nature of D	ebt (Purpose):		
Mailing Address						
City State	Zip Code		_			
Outstanding Balance Beginning This Period						
Amount Incurred This Period	Payment This	Period	Outstandir	a Balance at Close of This Period		
	r ayment mis		Outstanding Balance at Close of This Perio			
	7 7	1 1 1 1		- y		
C. Full Name (Last, First, Middle Initial) of Debtor o	r Creditor		Nature of Debt (Purpose):			
Mailing Address						
City	State Zip Co	ode	_			
Outstanding Balance Beginning This Period						
Amount Incurred This Period	Payment This	Period	Outstandir	ng Balance at Close of This Period		
			1			
	7 7			7 7 7		
SUBTOTALS This Period This Page (optional)				0.00		
				806.25		
) TOTALS This Period (last page this line number on	у)			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
) TOTAL OUTSTANDING LOANS from Schedule C (	ast page only)	•	·	26018.63		
ADD 2) and 3) and carry forward to appropriate line	e of Summary Page	(last page only)		26824.88		

FFC	Schedule	D	(Form	3)	(Revised	02/2003)	
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