

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

Friends of Rob Garagiola

ADDRESS (number and street) ▼

PO Box 833

Check if different than previously reported. (ACC)

Frederick

MD

21705

2. **FEC IDENTIFICATION NUMBER** ▼

C C00503920

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

MD

06

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 / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Sue Hecht

Signature of Treasurer Sue Hecht

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Friends of Rob Garagiola

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))....	1350.00	783138.40
(b) Total Contribution Refunds (from Line 20(d))	0.00	55550.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1350.00	727588.40
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1992.10	731298.71
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	9630.74
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1992.10	721667.97
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2316.98	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	55524.68	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Friends of Rob Garagiola

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/> (date after general election) through <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2012"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)	<input type="text" value="1250.00"/>	<input type="text" value="472214.56"/>
(ii) Unitemized	<input type="text" value="100.00"/>	<input type="text" value="44162.72"/>
(iii) Total of contributions from individuals	<input type="text" value="1350.00"/>	<input type="text" value="516377.28"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees	<input type="text" value="0.00"/>	<input type="text" value="266761.12"/>
	<input type="text" value="750.00"/>	<input type="text" value="750.00"/>
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 14

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
1350.00	783138.40	750.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	9630.74	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
1350.00	792769.14	750.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 14

Write or Type Committee Name

Friends of Rob Garagiola

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

II. DISBURSEMENTS

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="1992.10"/>	<input type="text" value="731298.71"/>	<input type="text" value="664.96"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="0.00"/>	<input type="text" value="43550.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 14

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	12000.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	55550.00	0.00
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21. OTHER DISBURSEMENTS

0.00	3750.00	0.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

1992.10	790598.71	664.96
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

1350.00	727588.40	750.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

1992.10	721667.97	664.96
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2959.08
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	1350.00
25. SUBTOTAL (add Line 23 and Line 24).....	4309.08
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1992.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	2316.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Friends of Rob Garagiola

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

Mailing Address 611 Edgevale Rd

City Baltimore State MD Zip Code 21210-1903

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

Name of Employer Capitol Strategies, LLC Occupation Principal

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2012

Transaction ID : C2947471

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jaralyn Finn

Mailing Address 16021 Partnership Rd

City Poolesville State MD Zip Code 20837

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

Name of Employer Self employed Occupation horse trainer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2012

Transaction ID : C2921596

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Timothy A. Perry

Mailing Address 5612 Enderly Rd

City Baltimore State MD Zip Code 21212-2939

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

Name of Employer Gordon & Feinblatt LLC Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2012

Transaction ID : C2947470

Amount of Each Receipt this Period
250.00

2012 Primary Debt

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

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

750.00

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

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

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NAME OF COMMITTEE (In Full)
Friends of Rob Garagiola

Full Name (Last, First, Middle Initial) A. Sushant Sidh		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 11 / 2012	
Mailing Address 13819 Piscataway Dr		Transaction ID : C2947472	
City Fort Washington	State MD	Zip Code 20744-6637	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Capitol Strategies, LLC	Occupation Principal		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
		2012 Primary Debt	

Full Name (Last, First, Middle Initial) B. William Williard		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address PO Box 626		Transaction ID : C2924830	
City Poolesville	State MD	Zip Code 20837-0626	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	1250.00

**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 9 OF 14			
	<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)
Friends of Rob Garigiola

Full Name (Last, First, Middle Initial)
A. Apple Press

Mailing Address 7617 Baltimore Annapolis Blvd

City State Zip Code
Glen Burnie MD 21060-7343

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 13 / 2012

Amount of Each Disbursement this Period
402.80

Transaction ID : D186566

Category/Type
001

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

Mailing Address 5565 Glenridge Connector NE Ste 2000

City State Zip Code
Atlanta GA 30342-4799

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 03 / 2012

Amount of Each Disbursement this Period
17.89

Transaction ID : D186556

Category/Type
001

Full Name (Last, First, Middle Initial)
c. First Data

Mailing Address 5565 Glenridge Connector NE Ste 2000

City State Zip Code
Atlanta GA 30342-4799

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 03 / 2012

Amount of Each Disbursement this Period
5.30

Transaction ID : D186557

Category/Type
001

SUBTOTAL of Disbursements This Page (optional)..... 425.99

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 14			
	<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)
Friends of Rob Garigiola

A. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-4799
Purpose of Disbursement Credit Card Processing Fee
Candidate Name
Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)
State: District:

Date of Disbursement: 12 / 03 / 2012
Amount of Each Disbursement this Period: 2.02
Transaction ID : D186558
Category/Type: 001

B. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-4799
Purpose of Disbursement Credit Card Processing Fee
Candidate Name
Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)
State: District:

Date of Disbursement: 11 / 05 / 2012
Amount of Each Disbursement this Period: 95.05
Transaction ID : D186551
Category/Type: 001

C. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-4799
Purpose of Disbursement Credit Card Processing Fee
Candidate Name
Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)
State: District:

Date of Disbursement: 11 / 05 / 2012
Amount of Each Disbursement this Period: 5.00
Transaction ID : D186552
Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 102.07
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 14			
	<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)
Friends of Rob Garigiola

Full Name (Last, First, Middle Initial) A. First Data		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 0.03 Transaction ID : D186553
City Atlanta	State GA Zip Code 30342-4799	
Purpose of Disbursement Credit Card Processing Fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 125.00 Transaction ID : D180924
City Mountain View	State CA Zip Code 94043	
Purpose of Disbursement Advertisements	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Google		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 8.06 Transaction ID : D186550
City Mountain View	State CA Zip Code 94043	
Purpose of Disbursement Advertisements	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	133.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 14			
	<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)
Friends of Rob Garigiola

Full Name (Last, First, Middle Initial) A. M&T Bank		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 21006 Frederick Road		Amount of Each Disbursement this Period 20.00 Transaction ID : D186554
City Germantown	State MD	
Zip Code 20876-4132	Purpose of Disbursement Bank Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. M&T Bank		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address 21006 Frederick Road		Amount of Each Disbursement this Period 20.00 Transaction ID : D186559
City Germantown	State MD	
Zip Code 20876-4132	Purpose of Disbursement Bank Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Next Level Partners, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 50 E St SE Ste 1		Amount of Each Disbursement this Period 1000.00 Transaction ID : D180927
City Washington	State DC	
Zip Code 20003-2620	Purpose of Disbursement Consultant - Compliance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1040.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 14			
	<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)
Friends of Rob Garigiola

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 94.00 Transaction ID : D180925
City Rochester State NY Zip Code 14625-0397	Purpose of Disbursement Payroll Invoice	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 102.95 Transaction ID : D186555
City Rochester State NY Zip Code 14625-0397	Purpose of Disbursement Payroll Invoice	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address 911 Panorama Trail S		Amount of Each Disbursement this Period 94.00 Transaction ID : D186561
City Rochester State NY Zip Code 14625-0397	Purpose of Disbursement Payroll Invoice	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	290.95
TOTAL This Period (last page this line number only).....	1992.10

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Friends of Rob Garagiola

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Strategy Group		Nature of Debt (Purpose): Direct Mail
Mailing Address 1606 20th St NW FI 3		
City State	Zip Code	
Washington DC	20009-1080	

Outstanding Balance Beginning This Period	Transaction ID : D172321	
<input type="text" value="55524.68"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="55524.68"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="55524.68"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="55524.68"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="55524.68"/>