

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

MARK ASSINI FOR CONGRESS

ADDRESS (number and street) 3363 BUFFALO ROAD

Check if different than previously reported. (ACC)

ROCHESTER

NY

14624

2. **FEC IDENTIFICATION NUMBER** ▼

C C00555219

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

NY

25

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 Mrs. Mary Ann Clarno

Signature of Treasurer Mrs. Mary Ann Clarno

[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

MARK ASSINI FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 06 / 05 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

	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))....	9557.00	90369.28
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	9557.00	90369.28
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1491.20	5806.72
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1491.20	5806.72
8. Cash on Hand at Close of Reporting Period (from Line 27).....	84562.56	
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).....	998.39	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

MARK ASSINI FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7382.00	77093.47
(ii) Unitemized.....	1675.00	12767.81
(iii) TOTAL of contributions from individuals ▶	9057.00	89861.28
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	500.00
(d) The Candidate.....	0.00	8.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	9557.00	90369.28
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	9557.00	90369.28

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1491.20	5806.72
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1491.20	5806.72

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	76496.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9557.00
25. SUBTOTAL (add Line 23 and Line 24).....	86053.76
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1491.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	84562.56

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 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)
MARK ASSINI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Philip Brooks

Mailing Address P.O. Box 873

City Nunda State NY Zip Code 14517

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

Name of Employer Power & Construction Group Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : SA11AI.4572

Amount of Each Receipt this Period
500.00

Individual Donation

B. Full Name (Last, First, Middle Initial)
James Campbell

Mailing Address 80 Brooklea Drive

City Rochester State NY Zip Code 14624

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

Name of Employer Town of Gates Occupation Parks Supervisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1853.47

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11AI.4593

Amount of Each Receipt this Period
432.00

In-kind - Modern Signs (Bumper Stickers)

C. Full Name (Last, First, Middle Initial)
David Curtis

Mailing Address 7 Spruce Ridge

City Fairport State NY Zip Code 14450

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : SA11AI.4545

Amount of Each Receipt this Period
250.00

Individual Donation

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

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

1182.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 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)
MARK ASSINI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Allyn Edward Hetzke

Mailing Address 303 Whittier Road

City State Zip Code
Spencerport NY 14559

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

Name of Employer Occupation
Unitrac Energy Management President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : SA11AI.4537

Amount of Each Receipt this Period
250.00

Individual Donation

B. Full Name (Last, First, Middle Initial)
George Kaleh

Mailing Address 1025 Dulles Avenue

City State Zip Code
Stafford TX 77477

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

Name of Employer Occupation
Cornerbrook Development Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2014

Transaction ID : SA11AI.4581

Amount of Each Receipt this Period
400.00

Individual Donation

C. Full Name (Last, First, Middle Initial)
Robert Marcello

Mailing Address 150 Willow Ridge Trail

City State Zip Code
Rochester NY 14626

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

Name of Employer Occupation
Premier Homes, Inc. New Home Builder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11AI.4561

Amount of Each Receipt this Period
200.00

Individual Donation

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 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	

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NAME OF COMMITTEE (In Full)
MARK ASSINI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jerome McEvily

Mailing Address 3 Brunson Way

City Penfield State NY Zip Code 14526

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

Name of Employer ES Systems, Inc Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : SA11AI.4574

Amount of Each Receipt this Period
 1000.00

Individual Donation

B. Full Name (Last, First, Middle Initial)
Passero Associates

Mailing Address 100 Liberty Pole Way

City Rochester State NY Zip Code 14604

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 17 / 2014

Transaction ID : SA11AI.4541

Amount of Each Receipt this Period
 250.00

Donation (LLC - Partnership)

C. Full Name (Last, First, Middle Initial)
David Pastore

Mailing Address 1300 Brighton Henrietta Town Line

City Rochester State NY Zip Code 14623

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

Name of Employer Upstate Roofing & Painting Inc Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 05 / 2014

Transaction ID : SA11AI.4521

Amount of Each Receipt this Period
 1000.00

Fundraiser - 2014JUN4

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 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)
MARK ASSINI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jacqueline Perrotta

Mailing Address 711 Pixley Road

City Rochester State NY Zip Code 14624

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

Name of Employer Self Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2014

Transaction ID : SA11AI.4560

Amount of Each Receipt this Period
 100.00

Individual Donation

B. Full Name (Last, First, Middle Initial)
Art Plewa

Mailing Address 177 Wedgedon Landing

City Hilton State NY Zip Code 14468

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

Name of Employer Town of Gates Occupation Finance Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **269.05**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 14 / 2014

Transaction ID : SA11AI.4562

Amount of Each Receipt this Period
 100.00

Individual Donation

C. Full Name (Last, First, Middle Initial)
Timonhy Poley

Mailing Address 233 Watson Road

City Fairport State NY Zip Code 14450

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

Name of Employer Strategic Consulting Associate Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : SA11AI.4576

Amount of Each Receipt this Period
 300.00

Individual Donation

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 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	

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NAME OF COMMITTEE (In Full)
MARK ASSINI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kelly Shea

Mailing Address 11 San Gabriel Drive

City Rochester State NY Zip Code 14610

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

Name of Employer Landmark Group of Brighton Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : SA11AI.4589

Amount of Each Receipt this Period
500.00

Individual Donation

B. Full Name (Last, First, Middle Initial)
Al Spaziano

Mailing Address P.O. Box 26350

City Rochester State NY Zip Code 14626

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

Name of Employer Platinum Property Management Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : SA11AI.4583

Amount of Each Receipt this Period
600.00

Individual Donation

C. Full Name (Last, First, Middle Initial)
Al Spaziano

Mailing Address P.O. Box 26350

City Rochester State NY Zip Code 14626

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

Name of Employer Platinum Property Management Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : SA11AI.4584

Amount of Each Receipt this Period
400.00

Individual Donation

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 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)
MARK ASSINI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Tambe

Mailing Address 30 Cheshire RDG

City Victor State NY Zip Code 14564

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

Name of Employer Tambe Electric Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 05 / 2014

Transaction ID : SA11AI.4526

Amount of Each Receipt this Period
 500.00

Fundraiser - 2014JUN4

B. Full Name (Last, First, Middle Initial)
James Vanbrederode

Mailing Address 190 Ogden Center Road

City Spencerport State NY Zip Code 14559

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

Name of Employer Town of Gates Occupation Police Chief

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : SA11AI.4542

Amount of Each Receipt this Period
 100.00

Individual Donation

C. Full Name (Last, First, Middle Initial)
Randal Weaver

Mailing Address 45 Riccardi Drive

City Rochester State NY Zip Code 14626

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

Name of Employer TransPro Consulting Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 22 / 2014

Transaction ID : SA11AI.4563

Amount of Each Receipt this Period
 500.00

Individual Donation

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

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

1100.00

7382.00

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

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

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NAME OF COMMITTEE (In Full)
MARK ASSINI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TOM REED FOR CONGRESS

Mailing Address PO BOX 391

City State Zip Code
GENEVA NY 14456

FEC ID number of contributing federal political committee. **C** C00464032

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : SA11C.4530

Amount of Each Receipt this Period
500.00

Fundraiser - 2014JUN3

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

500.00

**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 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)
MARK ASSINI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. James Campbell		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 80 Brooklea Drive		Amount of Each Disbursement this Period 432.00 Transaction ID : SB17.4594
City Rochester	State NY Zip Code 14624	
Purpose of Disbursement In-kind - Modern Signs (Bumper Stickers)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PayPal		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 1840 Embarcadero Road		Amount of Each Disbursement this Period 47.20 Transaction ID : SB17.4598
City Palo Alto	State CA Zip Code 94303	
Purpose of Disbursement PayPal Transition Fee (7 fees)		Category/ Type
Candidate Name MARK ASSINI FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 25		

Full Name (Last, First, Middle Initial) c. Mary Sperr		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 4043 Union Street, North		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4565
City Chili	State NY Zip Code 14514	
Purpose of Disbursement Consultant		Category/ Type
Candidate Name MARK ASSINI FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 25		

SUBTOTAL of Disbursements This Page (optional).....	979.20
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)
MARK ASSINI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mary Sperr		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 4043 Union Street, North		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4567
City Chili	State NY	
Purpose of Disbursement Consultant		Category/ Type
Candidate Name MARK ASSINI FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 25	

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

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

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	1479.20

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 14
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

MARK ASSINI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mrs. Mary Ann Clarno		Nature of Debt (Purpose): In Kind - Signs - to be reimbursed
Mailing Address 3363 Buffalo Road		
City	State	Zip Code
Rochester	NY	14624

Outstanding Balance Beginning This Period	Transaction ID : SD10.4331	
<input type="text" value="601.41"/>		
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="601.41"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mrs. Mary Ann Clarno		Nature of Debt (Purpose): Web Hosting
Mailing Address 3363 Buffalo Road		
City	State	Zip Code
Rochester	NY	14624

Outstanding Balance Beginning This Period	Transaction ID : SD10.4111	
<input type="text" value="350.00"/>		
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="350.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mrs. Mary Ann Clarno		Nature of Debt (Purpose): Genesee Stamp (Name Tags) - to be reimbursed
Mailing Address 3363 Buffalo Road		
City	State	Zip Code
Rochester	NY	14624

Outstanding Balance Beginning This Period	Transaction ID : SD10.4135	
<input type="text" value="46.98"/>		
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="46.98"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="998.39"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="998.39"/>
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="998.39"/>