

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
Glenn Ivey for Congress

ADDRESS (number and street) PO Box 6408
 Check if different than previously reported. (ACC) Largo MD 20792

2. **FEC IDENTIFICATION NUMBER** C C00505065 3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
Largo MD 20792 MD 04

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 04 / 03 / 2012 in the State of MD
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 04 / 03 / 2012 in the State of MD

5. Covering Period 01 / 01 / 2012 through 03 / 14 / 2012

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 Timothy O'Brien
Signature of Treasurer Timothy O'Brien [Electronically Filed] Date 03 / 22 / 2012

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Glenn Ivey for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	7322.00	142977.00
(b) Total Contribution Refunds (from Line 20(d))	27927.32	27927.32
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-20605.32	115049.68
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	25760.23	58889.98
(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)).....	25760.23	58889.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	76159.70	
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).....	20000.00	

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

Glenn Ivey 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).....	6750.00	136800.00
(ii) Unitemized.....	572.00	5177.00
(iii) TOTAL of contributions from individuals ▶	7322.00	141977.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7322.00	142977.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	20000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	20000.00
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)..... ▶	7322.00	162977.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25760.23	58889.98
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	27927.32	27927.32
(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)).....	27927.32	27927.32
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	53687.55	86817.30

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	122525.25
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	7322.00
25. SUBTOTAL (add Line 23 and Line 24).....	129847.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	53687.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	76159.70

**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 25
	<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	

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)
Glenn Ivey for Congress

A. Full Name (Last, First, Middle Initial)
Barbara Goldberg

Mailing Address 10039 Carmelita Drive

City Potomac State MD Zip Code 20854

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

Name of Employer Regal Domestic Inc Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 04 / 2012

Transaction ID : SA11AI.4626

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 5824 Conway Road

City Bethesda State MD Zip Code 20817

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

Name of Employer K & L Gates LLP Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2012

Transaction ID : SA11AI.4624

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Alan L Meltzer

Mailing Address 6500 Rock Spring Drive Suite 500

City Bethesda State MD Zip Code 20817

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

Name of Employer The Meltzer Group Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 04 / 2012

Transaction ID : SA11AI.4533

Amount of Each Receipt this Period
 500.00

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

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

3250.00

**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 25
	<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)
Glenn Ivey for Congress

A. Full Name (Last, First, Middle Initial)
Julian Juan Miguel

Mailing Address 1716 Peach Tree Lane

City State Zip Code
Bowie MD 20721

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

Name of Employer Occupation
Mexico Lindo Restaurant General Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 03 / 2012

Transaction ID : SA11AI.4622

Amount of Each Receipt this Period
250.00

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

Mailing Address 11753 Gainsborough Road

City State Zip Code
Potomac MD 20854

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

Name of Employer Occupation
Deloitte & Touche Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 04 / 2012

Transaction ID : SA11AI.4535

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Andre R Rogers

Mailing Address 15511 Humbside Way

City State Zip Code
Upper Marlboro MD 20774

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

Name of Employer Occupation
Enlightened, Inc Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 11 / 2012

Transaction ID : SA11AI.4543

Amount of Each Receipt this Period
500.00

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

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

1750.00

**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 25
	<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)
Glenn Ivey for Congress

A. Full Name (Last, First, Middle Initial)
Richard Schiffer

Mailing Address 6907 Crail Drive

City State Zip Code
Bethesda MD 20817

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

Name of Employer Occupation
N/A Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 04 / 2012

Transaction ID : SA11AI.4531

Amount of Each Receipt this Period
1000.00

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

Mailing Address 3811 Kanawha Street, NW

City State Zip Code
Washington DC 20015

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

Name of Employer Occupation
Cohen Milstein 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
01 / 18 / 2012

Transaction ID : SA11AI.4635

Amount of Each Receipt this Period
250.00

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

Mailing Address 10538 Tuckerman Heights Circle

City State Zip Code
Rockville MD 20852

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

Name of Employer Occupation
Andy Stern's Office Equipment President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 04 / 2012

Transaction ID : SA11AI.4529

Amount of Each Receipt this Period
500.00

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

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

1750.00

6750.00

**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 8 OF 25	
	<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)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Harris Public Interst Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2012
Mailing Address 5804 Berkeley Avenue		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4556
City Baltimore	State MD Zip Code 21215	
Purpose of Disbursement Consulting	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. Ramon Korionoff		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012
Mailing Address 609 River Bend Road		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.4553
City Ft. Washington	State MD Zip Code 20744	
Purpose of Disbursement Media Consultant	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. Lester & Associates		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address 10205 Baltimore Avenue Suite 7102		Amount of Each Disbursement this Period 4951.00 Transaction ID : SB17.4551
City College Park	State MD Zip Code 20740	
Purpose of Disbursement Consulting	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:		

SUBTOTAL of Disbursements This Page (optional).....	9451.00
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 9 OF 25			
	<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)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. M & T Bank		Date of Disbursement MM / DD / YYYY 01 / 10 / 2012
Mailing Address 7599 Greenbelt Road		Amount of Each Disbursement this Period 59.50 Transaction ID : SB17.4558
City Greenbelt State MD Zip Code 20770	Purpose of Disbursement Bank Charges 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) B. M & T Bank		Date of Disbursement MM / DD / YYYY 02 / 08 / 2012
Mailing Address 7599 Greenbelt Road		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.4559
City Greenbelt State MD Zip Code 20770	Purpose of Disbursement Bank Charges 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. OMR		Date of Disbursement MM / DD / YYYY 01 / 06 / 2012
Mailing Address 7253-C Hanover Parkway		Amount of Each Disbursement this Period 5450.00 Transaction ID : SB17.4554
City Greenbelt State MD Zip Code 20770	Purpose of Disbursement Focus Group Candidate Name Category/Type 005	
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).....	5524.50
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 25			
	<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)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. PayPal		Date of Disbursement MM / DD / YYYY 03 / 14 / 2012
Mailing Address PO Box 45950		Amount of Each Disbursement this Period 151.92 Transaction ID : SB17.4639
City Omaha	State NE	
Zip Code 68145-0950	Purpose of Disbursement 1Q 2012 Fees (Total)	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. The Mellinger Group		Date of Disbursement MM / DD / YYYY 01 / 09 / 2012
Mailing Address 1200 Light Street Apt B		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.4547
City Baltimore	State MD	
Zip Code 21230	Purpose of Disbursement Fundraising Consultant	Category/ Type 003
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. The Mellinger Group		Date of Disbursement MM / DD / YYYY 02 / 02 / 2012
Mailing Address 1200 Light Street Apt B		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.4560
City Baltimore	State MD	
Zip Code 21230	Purpose of Disbursement Consulting Fee	Category/ Type 003
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).....	10651.92
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 25			
	<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)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. The Mellinger Group		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address 1200 Light Street Apt B		Amount of Each Disbursement this Period 132.81
City Baltimore	State MD	
Zip Code 21230		Transaction ID : SB17.4561
Purpose of Disbursement Reimbursement of out-of-pocket costs	Category/Type 003	
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		
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	
Zip Code		
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).....	132.81
TOTAL This Period (last page this line number only).....	25760.23

**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 25	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Daniel Abramowitz		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 110 N. Washington St. Suite 401		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4563
City Rockville	State MD	
Zip Code 20850	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Leonard Bebchick		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 6321 Lenox Rd.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4564
City Bethesda	State MD	
Zip Code 20817	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Dorothy Bennett		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 3405 Rustic Way Lane		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4565
City Falls Church	State VA	
Zip Code 22044	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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).....	1157.19
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 25			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Paul Berger			Date of Disbursement MM / DD / YYYY 02 / 27 / 2012	
Mailing Address 555 12th St., NW			Amount of Each Disbursement this Period 578.59	
City Washington	State DC	Zip Code 20004	Transaction ID : SB20A.4568	
Purpose of Disbursement Pro-Rata Refund		Category/ Type 010		
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. Gary Berman			Date of Disbursement MM / DD / YYYY 02 / 27 / 2012	
Mailing Address 8124 Spilt Oak Dr.			Amount of Each Disbursement this Period 1446.48	
City West Bethesda	State MD	Zip Code 20817	Transaction ID : SB20A.4569	
Purpose of Disbursement Pro-Rata Refund		Category/ Type 010		
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. David Butler			Date of Disbursement MM / DD / YYYY 02 / 27 / 2012	
Mailing Address 501 Hermleigh Rd.			Amount of Each Disbursement this Period 1446.48	
City Silver Spring	State MD	Zip Code 20902	Transaction ID : SB20A.4570	
Purpose of Disbursement Pro-Rata Refund		Category/ Type 010		
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).....	3471.55
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 14 OF 25			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Ryna Cohen		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 5630 Wisconsin Ave. Apt 802		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4573
City Chevy Chase	State MD	
Zip Code 20815	Purpose of Disbursement Pro-Rata Refund	Category/Type 010
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. Behnam Dayanim		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 11601 Yeatman Terr.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4576
City Silver Spring	State MD	
Zip Code 20902	Purpose of Disbursement Pro-Rata Refund	Category/Type 010
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. William Dockser		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 8906 Clewerwall Dr.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4577
City Bethesda	State MD	
Zip Code 20817	Purpose of Disbursement Pro-Rata Refund	Category/Type 010
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).....	1446.48
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 15 OF 25			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. David Eppler		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 5116 Moorland Lane		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4578
City Bethesda	State MD	
Zip Code 20814	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Allan Fox		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 8 W. Lenox St.		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4580
City Chevy Chase	State MD	
Zip Code 20815	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Michael Freedman		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 7526 Glennon Dr.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4582
City Bethesda	State MD	
Zip Code 20817	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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).....	2603.66
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 16 OF 25	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Michael Gelman		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 11 W. Lennox St.		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4583
City Chevy Chase	State MD	
Zip Code 20815	Purpose of Disbursement Pro-Rata Refund	Category/Type 010
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. Susan Gelman		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 11 W. Lennox St.		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4585
City Chevy Chase	State MD	
Zip Code 20815	Purpose of Disbursement Pro-Rata Refund	Category/Type 010
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. Barbara Goldberg		Date of Disbursement MM / DD / YYYY 01 / 31 / 2012
Mailing Address 10039 Carmelita Drive		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB20A.4636
City Potomac	State MD	
Zip Code 20854	Purpose of Disbursement PayPal Contribution Returned	Category/Type 005
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).....	5392.96
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 17 OF 25			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Neil Gurvitch		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 11829 Goya Dr.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4587
City Potomac	State MD	
Zip Code 20854	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Neil Gurvitch		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 11829 Goya Dr.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4589
City Potomac	State MD	
Zip Code 20854	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Steven Jacobson		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 6512 Old Farm Ct.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4593
City Rockville	State MD	
Zip Code 20852	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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).....	867.90
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 18 OF 25			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Eric Kassoff		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 7604 Rossdhu Court		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4600
City Chevy Chase	State MD	
Zip Code 20815	Purpose of Disbursement Pro-Rata Refund	Category/Type 010
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. Stuart Kurlander		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 2601 Foxhall Rd., NW		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4601
City Washington	State DC	
Zip Code 20007	Purpose of Disbursement	Category/Type 010
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. Jennifer Laszlo Mizrahi		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 9800 Avenel Farm Dr.		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4604
City Potomac	State MD	
Zip Code 20854	Purpose of Disbursement Pro-Rata Refund	Category/Type 010
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).....	2025.08
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 19 OF 25			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Louis Mayberg		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 411 Hermleigh Rd.		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4602
City Silver Spring	State MD	
Zip Code 20902	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Manette Mayberg		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 411 Hermleigh Rd.		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4603
City Silver Spring	State MD	
Zip Code 20902	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Abraham Miller		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 50 Public Square Suite 1600		Amount of Each Disbursement this Period 867.89 Transaction ID : SB20A.4608
City Cleveland	State OH	
Zip Code 44113	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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).....	3760.85
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 20 OF 25			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Irwin Panitch		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 11753 Gainsborough Road		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4605
City Potomac	State MD	
Zip Code 20854	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Greg Rosenbaum		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 9140 Vendome Dr.		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4607
City Bethesda	State MD	
Zip Code 20817	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Richard Schifter		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 6907 Crail Drive		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4610
City Bethesda	State MD	
Zip Code 20817	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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).....	2603.66
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 21 OF 25	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Linda Singer		Date of Disbursement MM / DD / YYYY 03 / 14 / 2012
Mailing Address 3811 Kanawha Street, NW		Amount of Each Disbursement this Period 250.00 Transaction ID : SB20A.4638
City Washington State DC Zip Code 20015	Purpose of Disbursement PayPal Contribution Returned Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Marc Solomon		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 9313 Rapley Preserve Dr.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4612
City Potomac State MD Zip Code 20854	Purpose of Disbursement Pro-Rata Refund Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Andrew Stern		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 10538 Tuckerman Heights Circle		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4614
City Rockville State MD Zip Code 20852	Purpose of Disbursement Pro-Rata Refund Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1117.89
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 22 OF 25	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. John Verstandig		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 6900 Armat Dr.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4616
City Bethesda	State MD	
Zip Code 20817	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Steven Wechsler		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 6520 Bradley Blvd.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4618
City Bethesda	State MD	
Zip Code 20817	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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. Randy Alan Weiss		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 1150 Connecticut Ave., NW #900		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4620
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
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).....	1446.48
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 23 OF 25			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Yolanda Maria Welch-Martinez			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012	
Mailing Address 10370 Pot Spring Rd.			Amount of Each Disbursement this Period 1000.00	
City Lutherville	State MD	Zip Code 21093	Transaction ID : SB20A.4562	
Purpose of Disbursement Check Returned By Bank		010 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.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
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	Zip Code		
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).....	1000.00
TOTAL This Period (last page this line number only).....	26893.70

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Glenn Ivey for Congress** Transaction ID : **SC/10.4507**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
GLENN F IVEY Primary
 Mailing Address PO BOX 6408 General
 Other (specify) ▼

City State ZIP Code
 LARGO MD 20792

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS

Date Incurred M 11 / D 14 / Y 2011	Date Due M M / D D / Y Demand	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	10000.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Glenn Ivey for Congress** Transaction ID : **SC/10.4508**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
GLENN F IVEY Primary
 Mailing Address PO BOX 6408 General
 Other (specify) ▼

City State ZIP Code
 LARGO MD 20792

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS Date Incurred Date Due Interest Rate Secured:
 M 11 / D 23 / Y 2011 M M / D D / Y Demand 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	10000.00
TOTALS This Period (last page in this line only).....	▶	20000.00

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