

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

DeFranco for Congress

ADDRESS (number and street)

PO Box 103

Check if different than previously reported. (ACC)

Middleton

MA

01949

2. FEC IDENTIFICATION NUMBER ▼

C C00547257

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MA

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

09

09

2014

in the State of

MA

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

07

01

2014

through

08

20

2014

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 Kai Moy

Signature of Treasurer Kai Moy

[Electronically Filed]

Date

08

28

2014

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

DeFranco for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 08 / 20 / 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))....	4244.00	24866.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	4244.00	24866.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	15170.08	2037.75
(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)).....	15170.08	2037.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	19537.91	
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).....	0.00	

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

DeFranco 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).....	2400.00	16323.00
(ii) Unitemized.....	1844.00	8543.00
(iii) TOTAL of contributions from individuals ▶	4244.00	24866.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4244.00	24866.00
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)..... ▶	4244.00	24866.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	15170.08	2037.75
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) ►	15170.08	2037.75

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	30463.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4244.00
25. SUBTOTAL (add Line 23 and Line 24).....	34707.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15170.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	19537.91

**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 16
	<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)
DeFranco for Congress

A. Full Name (Last, First, Middle Initial)
Patricia Berger

Mailing Address 60 Heath Street

City State Zip Code
Brookline MA 02445

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

Name of Employer Occupation
None None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2014

Transaction ID : SA11AI.5157

Amount of Each Receipt this Period
100.00

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

Mailing Address 21 Niagara Pier

City State Zip Code
Erie PA 16507

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2014

Transaction ID : SA11AI.5156

Amount of Each Receipt this Period
500.00

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

Mailing Address 48 East Street

City State Zip Code
Ipswich MA 01938

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 23 / 2014

Transaction ID : SA11AI.5150

Amount of Each Receipt this Period
50.00

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

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

650.00

**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 16
	<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)
DeFranco for Congress

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

Mailing Address 48 East Street

City Ipswich State MA Zip Code 01938

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
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.5163

Amount of Each Receipt this Period
100.00

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

Mailing Address 100 Aprils Way

City Tewksbury State MA Zip Code 01876

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

Name of Employer People's Federal Savings Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
265.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : SA11AI.5198

Amount of Each Receipt this Period
100.00

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

Mailing Address 321 Walnut St #235

City Newton State MA Zip Code 02460

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

Name of Employer FCD Educational Services Occupation Nonprofit Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA11AI.5148

Amount of Each Receipt this Period
100.00

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

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

300.00

**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 16
	<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)
DeFranco for Congress

A. Full Name (Last, First, Middle Initial)
Tom Gee

Mailing Address 321 Walnut St
#235

City State Zip Code
Newton MA 02460

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

Name of Employer Occupation
FCD Educational Services Nonprofit Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2014

Transaction ID : SA11AI.5194

Amount of Each Receipt this Period
100.00

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

Mailing Address 1855 Campden Way

City State Zip Code
Fairview PA 16415

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11AI.5158

Amount of Each Receipt this Period
200.00

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

Mailing Address 16 Lakeview Rd

City State Zip Code
Middleton MA 01949

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11AI.5188

Amount of Each Receipt this Period
50.00

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

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

350.00

**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 16
	<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)
DeFranco for Congress

A. Full Name (Last, First, Middle Initial)
Vladimir Mishin

Mailing Address 12973 Langstaff dr.
Apt 404

City Windermere State FL Zip Code 34786

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

Name of Employer rcg global consulting Occupation software consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11AI.5147

Amount of Each Receipt this Period
10.00

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

Mailing Address 12973 Langstaff dr.
Apt 404

City Windermere State FL Zip Code 34786

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

Name of Employer rcg global consulting Occupation software consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA11AI.5149

Amount of Each Receipt this Period
25.00

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

Mailing Address 12973 Langstaff dr.
Apt 404

City Windermere State FL Zip Code 34786

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

Name of Employer rcg global consulting Occupation software consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11AI.5152

Amount of Each Receipt this Period
15.00

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

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

50.00

**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 16
	<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)
DeFranco for Congress

A. Full Name (Last, First, Middle Initial)
Vladimir Mishin

Mailing Address 12973 Langstaff dr.
Apt 404

City Windermere State FL Zip Code 34786

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

Name of Employer rcg global consulting Occupation software consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.5192

Amount of Each Receipt this Period
25.00

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

Mailing Address 154 High Street

City Ipswich State MA Zip Code 01938

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

Name of Employer Self Occupation Deli Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
265.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11AI.5168

Amount of Each Receipt this Period
200.00

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

Mailing Address 48 Marshland Street

City Haverhill State MA Zip Code 01830

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

Name of Employer Community Action, Inc. Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.5193

Amount of Each Receipt this Period
25.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 16
	<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)
DeFranco for Congress

A. Full Name (Last, First, Middle Initial)
Jacalyn Stuart Bennett

Mailing Address 52 Rogers Street

City West Newbury State MA Zip Code 01985

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

Name of Employer **Bennett & Company** Occupation **President, CEO, Founder**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11A1.5183

Amount of Each Receipt this Period
800.00

In-kind -

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).....

800.00

2400.00

**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 11 OF 16			
	<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)
DeFranco for Congress

Full Name (Last, First, Middle Initial) A. BL Insurance		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 4417 Acushnet Avenue		Amount of Each Disbursement this Period 370.44
City New Bedford	State MA	
Zip Code 02745	Purpose of Disbursement 001	Transaction ID : SB17.5210
Candidate Name	Category/Type	
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. Regina Clewell		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 26 Wethersfield Street		Amount of Each Disbursement this Period 456.00
City Rowley	State MA	
Zip Code 01969	Purpose of Disbursement 001	Transaction ID : SB17.5209
Candidate Name	Category/Type	
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) C. Comcast		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014
Mailing Address 387 W Broadway		Amount of Each Disbursement this Period 131.87
City Boston	State MA	
Zip Code 02127	Purpose of Disbursement	Transaction ID : SB17.5204
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	958.31
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 16			
	<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)
DeFranco for Congress

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 387 W Broadway		Amount of Each Disbursement this Period 132.57
City Boston	State MA Zip Code 02127	
Purpose of Disbursement	001	Transaction ID : SB17.5216
Candidate Name	Category/Type	
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. ConnectPay		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 2352 Main Street Suite 303		Amount of Each Disbursement this Period 231.99
City Concord	State MA Zip Code 01742	
Purpose of Disbursement	001	Transaction ID : SB17.5222
Candidate Name	Category/Type	
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) c. ConnectPay		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 2352 Main Street Suite 303		Amount of Each Disbursement this Period 132.44
City Concord	State MA Zip Code 01742	
Purpose of Disbursement	001	Transaction ID : SB17.5230
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	497.00
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 16			
	<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)
DeFranco for Congress

Full Name (Last, First, Middle Initial) A. ConnectPay		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 2352 Main Street Suite 303		Amount of Each Disbursement this Period 62.50
City Concord	State MA	
Zip Code 01742	Purpose of Disbursement 001	Transaction ID : SB17.5231
Candidate Name	Category/ Type	
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. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address Reservoir Place, 1601 Trapelo Road		Amount of Each Disbursement this Period 15.94
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement	Transaction ID : SB17.5218
Candidate Name	Category/ Type	
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) C. Ellis Strategies		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address 11 Cedar Knoll		Amount of Each Disbursement this Period 2500.00
City Boxford	State MA	
Zip Code 01921	Purpose of Disbursement 004	Transaction ID : SB17.5227
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2578.44
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 16			
	<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)
DeFranco for Congress

Full Name (Last, First, Middle Initial) A. Maura Flynn		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 18 Patti Lane		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.5201
City Maynard	State MA	
Zip Code 01754	Purpose of Disbursement June	Category/ Type 001
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. Erie Germenji		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 11 Central Street		Amount of Each Disbursement this Period 523.76 Transaction ID : SB17.5220
City Beverly	State MA	
Zip Code 01915	Purpose of Disbursement	Category/ Type 001
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) C. Erie Germenji		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 11 Central Street		Amount of Each Disbursement this Period 334.35 Transaction ID : SB17.5229
City Beverly	State MA	
Zip Code 01915	Purpose of Disbursement	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	2358.11
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 16			
	<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)
DeFranco for Congress

Full Name (Last, First, Middle Initial) A. John Guilfoil		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 1 Westinghouse Plaza, Unit 315		Amount of Each Disbursement this Period 1500.00
City Boston	State MA	
Zip Code 02136	Purpose of Disbursement 001	Transaction ID : SB17.5205
Candidate Name	Category/ Type	
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. Phoebe Ramler & Associates		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 220 Walnut Street		Amount of Each Disbursement this Period 400.00
City Brookline	State MA	
Zip Code 02445	Purpose of Disbursement 001	Transaction ID : SB17.5207
Candidate Name	Category/ Type	
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) c. Jacalyn Stuart Bennett		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 52 Rogers Street		Amount of Each Disbursement this Period 800.00
City West Newbury	State MA	
Zip Code 01985	Purpose of Disbursement In-kind -	Transaction ID : SB17.5200
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2700.00
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 16 OF 16	
	<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)
DeFranco for Congress

Full Name (Last, First, Middle Initial) A. Ted Kontos		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 14 North Main Street		Amount of Each Disbursement this Period 400.00
City Middleton	State MA	
Zip Code 01949	Purpose of Disbursement Rent	Transaction ID : SB17.5217
Candidate Name	001 Category/Type	
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. WCVB Channel 5		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 5 TV Place		Amount of Each Disbursement this Period 5000.00
City Needham	State MA	
Zip Code 02494	Purpose of Disbursement	Transaction ID : SB17.5225
Candidate Name	004 Category/Type	
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) C. Yankee Homecoming Parade		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address PO Box 493		Amount of Each Disbursement this Period 500.00
City Newburyport	State MA	
Zip Code 01950	Purpose of Disbursement	Transaction ID : SB17.5214
Candidate Name	007 Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	5900.00
TOTAL This Period (last page this line number only).....	14991.86