

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
LORI FOR CONGRESS 2014

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 07 / 23 / 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))....	1720.00	13811.56
(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)).....	1720.00	13811.56
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5169.63	19428.98
(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)).....	5169.63	19428.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	44176.35	
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).....	51000.00	

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

LORI FOR CONGRESS 2014

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).....	650.00	3927.00
(ii) Unitemized.....	1070.00	3884.56
(iii) TOTAL of contributions from individuals ▶	1720.00	7811.56
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	6000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1720.00	13811.56
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	51000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	51000.00
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)..... ▶	1720.00	64811.56

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5169.63	19428.98
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	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) ►	5169.63	19428.98

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	47625.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1720.00
25. SUBTOTAL (add Line 23 and Line 24).....	49345.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5169.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	44176.35

**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 12
	<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)
LORI FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Canterbury Shopping Centerr, LLC

Mailing Address 46 Taugwonk Spur
Unit 8

City Stonington State CT Zip Code 06378

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA11AI.4834

Amount of Each Receipt this Period
 500.00

In-kind - Use of office space in Gristmill Plaza

B. Full Name (Last, First, Middle Initial)
Vernon Republican Town Committee

Mailing Address 7 Rheel St

City Rockville State CT Zip Code 06066

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA11AI.4847

Amount of Each Receipt this Period
 150.00

In-kind - Use of office space

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).....

650.00

650.00

**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 6 OF 12	
	<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)
LORI FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. Canterbury Shopping Centerr, LLC		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 46 Taugwonk Spur Unit 8		Amount of Each Disbursement this Period 999,999.99 500.00 Transaction ID : SB17.4835
City Stonington	State CT Zip Code 06378	
Purpose of Disbursement In-kind - Use of office space in Gristmill Plaza		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. LORI HOPKINS CAVANAGH		Date of Disbursement MM / DD / YYYY 07 / 06 / 2014
Mailing Address 943 OCEAN AVE		Amount of Each Disbursement this Period 999,999.99 300.00 Transaction ID : SB17.4772
City NEW LONDON	State CT Zip Code 06320	
Purpose of Disbursement Petty Cash-Expenses for DC trip		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CT District: 02		

Full Name (Last, First, Middle Initial) C. LORI HOPKINS CAVANAGH		Date of Disbursement MM / DD / YYYY 07 / 15 / 2014
Mailing Address 943 OCEAN AVE		Amount of Each Disbursement this Period 999,999.99 101.96 Transaction ID : SB17.4776
City NEW LONDON	State CT Zip Code 06320	
Purpose of Disbursement Reimburse for Paper Goods and Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CT District: 02		

SUBTOTAL of Disbursements This Page (optional).....	901.96
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 7 OF 12			
	<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)
LORI FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. Democracy Engine, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014	
Mailing Address 850 Quincy Street, NW #402			Amount of Each Disbursement this Period 2.07	
City Washington	State DC	Zip Code 20011	Transaction ID : SB17.4808	
Purpose of Disbursement Fundraising expense		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Democracy Engine, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014	
Mailing Address 850 Quincy Street, NW #402			Amount of Each Disbursement this Period 2.07	
City Washington	State DC	Zip Code 20011	Transaction ID : SB17.4809	
Purpose of Disbursement Fundraising expense		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Democracy Engine, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014	
Mailing Address 850 Quincy Street, NW #402			Amount of Each Disbursement this Period 7.90	
City Washington	State DC	Zip Code 20011	Transaction ID : SB17.4816	
Purpose of Disbursement Fundraising expense		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	12.04
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 8 OF 12			
	<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)
LORI FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. Jenn Ezzell		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 92 Sullivan Rd		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.4826
City Lisbon	State CT Zip Code 06351	
Purpose of Disbursement Services rendered for campaign	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jenn Ezzell		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 92 Sullivan Rd		Amount of Each Disbursement this Period 39.00 Transaction ID : SB17.4827
City Lisbon	State CT Zip Code 06351	
Purpose of Disbursement Flowers	Category/Type 006	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FASTSIGNS of Waterford		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 40 Boston Post Road		Amount of Each Disbursement this Period 129.22 Transaction ID : SB17.4820
City Waterford	State CT Zip Code 06385	
Purpose of Disbursement Perforated Window Film	Category/Type 006	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1068.22
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 12
	<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)
LORI FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. Key Bridge Marriott		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 1401 Lee Hwy		Amount of Each Disbursement this Period 305.10 Transaction ID : SB17.4814
City Arlington	State VA	
Zip Code 22209	Purpose of Disbursement Lodging	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Key Bridge Marriott		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 1401 Lee Hwy		Amount of Each Disbursement this Period 398.85 Transaction ID : SB17.4815
City Arlington	State VA	
Zip Code 22209	Purpose of Disbursement Lodging	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Minuteman Press		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 176 State St		Amount of Each Disbursement this Period 369.02 Transaction ID : SB17.4775
City New London	State CT	
Zip Code 06320	Purpose of Disbursement Business Cards and Thank You Cards	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1072.97
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 12	
	<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)
LORI FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. Minuteman Press		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 176 State St		Amount of Each Disbursement this Period 366.88
City New London	State CT	
Zip Code 06320	Purpose of Disbursement Business Cards	Transaction ID : SB17.4821
Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Shoreline Screen Printing, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 10 Liberty Way, B11		Amount of Each Disbursement this Period 741.50
City Niantic	State CT	
Zip Code 06357	Purpose of Disbursement T-Shirts and Design Services	Transaction ID : SB17.4774
Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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	
Candidate Name	Category/Type	
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).....	1108.38
TOTAL This Period (last page this line number only).....	4163.57

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **LORI FOR CONGRESS 2014** Transaction ID : **SC/10.4320**

LOAN SOURCE Full Name (Last, First, Middle Initial) **LORI HOPKINS CAVANAGH** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
 943 OCEAN AVE

City State ZIP Code
 NEW LONDON CT 06320

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
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TERMS

Date Incurred M 01 / D 27 / Y 2014	Date Due M M / D D / Y 11/04/2014	Interest Rate 4.00 % (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).....	[] 1000.00
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) **LORI FOR CONGRESS 2014** Transaction ID : **SC/10.4321**

LOAN SOURCE Full Name (Last, First, Middle Initial) **LORI HOPKINS CAVANAGH** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
 943 OCEAN AVE

City State ZIP Code
 NEW LONDON CT 06320

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
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TERMS

Date Incurred M 03 / D 05 / Y 2014	Date Due M M / D D / Y 11/04/2014	Interest Rate 4.00 % (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).....	50000.00
TOTALS This Period (last page in this line only).....	51000.00

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