

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

RECEIVED  
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2016 FEB 12 AM 7:42  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
MARTIN LONG FOR CONGRESS

ADDRESS (number and street)  
30 MELB ST SUITE 204  
Check if different than previously reported. (ACC)  
ARLINGTON MA 02476

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C 00548560 ARLINGTON MA 02476  
STATE ▼ DISTRICT  
MA 05

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 MM/DD/YYYY in the State of  
10/15/2013  
(c) 30-Day POST-Election Report for the:  
General (30G) Runoff (30R) Special (30S)  
Election on MM/DD/YYYY in the State of  
10/15/2013 MA

5. Covering Period MM/DD/YYYY through MM/DD/YYYY  
10/01/2015 through 12/31/2015

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 MARTIN LONG  
Signature of Treasurer [Signature] Date MM/DD/YYYY  
01/30/2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.  
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**FEC FORM 3**  
(Revised 02/2003)

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**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

**MARTIN LONG FOR CONGRESS**

Report Covering the Period: From:

MM / DD / YYYY

10 / 01 / 2015

To:

MM / DD / YYYY

12 / 31 / 2015

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	0.	0.
(b) Total Contribution Refunds (from Line 20(d)) .....	0.	0.
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	0.	0.
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	0.00	10.00
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	10.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	0.00	0.00
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>56.39</b>	
<b>9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.</b>	
<b>10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) .....</b>	<b>13,299.00</b>	

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)

Page 3

Write or Type-Committee Name

**MARTIN LONG FOR CONGRESS**

Report Covering the Period: From:

**10/01/2015**

To:

**12/31/2015**

**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).....

0.

0.

(ii) Unitemized.....

0.

0.

(iii) TOTAL of contributions from individuals.....

0.

0.

(b) Political Party Committees.....

0.

0.

(c) Other Political Committees (such as PACs).....

0.

0.

(d) The Candidate.....

0.

0.

(e) TOTAL CONTRIBUTIONS (other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

0.

0.

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....**

0.

0.

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.

0.

(b) All Other Loans.....

0.

0.

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.

0.

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....**

0.

10.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.).....**

0.

0.

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....**

0.

10.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 03/2012)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	0.	10.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.	0.
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	1.00	1,701.00
(b) Of All Other Loans.....	0.	0.
(c) TOTAL LOAN REPAYMENTS (Add Lines 19(a) and (b)).....	0.	0.
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.	0.
(b) Political Party Committees.....	0.	0.
(c) Other Political Committees (such as PACs).....	0.	0.
(d) TOTAL CONTRIBUTION REFUNDS (Add Lines 20(a), (b), and (c)).....	0.	0.
21. OTHER DISBURSEMENTS.....	0.	0.
22. TOTAL DISBURSEMENTS (Add Lines 17, 18, 19(c), 20(d), and 21) ▶	0.	1,711.00

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	57.39
24. TOTAL RECEIPTS THIS PERIOD (From Line 16, page 3).....	0.
25. SUBTOTAL (Add Line 23 and Line 24).....	57.39
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22).....	1.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	56.39

COLUMN C: NO FINANCIAL INFORMATION

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 2

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full) **MARTIN LONG FOR CONGRESS**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **LONG, MARTIN**

Mailing Address **30 Mill St Suite 204**

Election:  Primary  General  Other (specify) ▼

City **Arlington** State **MA** ZIP Code **02476**

Original Amount of Loan **4,500.00** Cumulative Payment To Date Balance Outstanding at Close of This Period

**TERMS** Date Incurred **07/31/2013** Date Due **NOVEMBER** Interest Rate **0** % (apr) Secured:  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) ..... **4,500.00**

**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**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 2 OF 2

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full) **MARTIN LONG FOR CONGRESS**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **LONG, MARTIN**

Mailing Address **30 Mill St. Suite 204**

Election:  Primary  General  Other (specify) ▼

City **Arlington** State **MA** ZIP Code **02476**

Original Amount of Loan **10,500.00** Cumulative Payment To Date **1,701.00** Balance Outstanding at Close of This Period **8,799.00**

**TERMS** Date Incurred **08/09/2013** Date Due **NOVEMBER** Interest Rate **0%** Secured:  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)..... **8,799.00**

**TOTALS** This Period (last page in this line only)..... **13,299.00**

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

NON-FINANCIAL DOCUMENTS

Mortia Long  
30 Mill St. #204  
Arlington, MA 02476

POSTNET



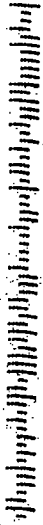
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 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office.	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER  
 (3/2015)

*MP*

*2/12/2016*  
 DATE PREPARED

20160202 10:11:00 AM