

**FEC  
FORM 3**

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

RECEIVED

2012 APR 19 AM 11:50

Office Use Only

FEC MAIL CENTER

12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

Joe Selvaggi For Congress

ADDRESS (number and street)

139A Charles Street

#272

Boston

MA

02114

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

C 00512467

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

MA

08

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

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

- General (30G)  Runoff (30R)  Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period

0' 2' / 0' 1' / 2' 0' 1' 2 through 0' 3' / 3' 1' / 2' 0' 1' 2

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 Chris McElroy

Signature of Treasurer

*Chris McElroy*

Date

0' 4' / 1' 0' / 2' 0' 1' 2

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

Office Use Only									
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**FEC FORM 3**  
(Revised 02/2003)

12030790360

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name  
Joe Selvaggi For Congress

Report Covering the Period: From: 02 / 01 / 2012 To: 03 / 31 / 2012

**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)) ....

1 0 8 2 5 0 0

(b) Total Contribution Refunds  
(from Line 20(d)) .....

0 0 0

(c) Net Contributions (other than loans)  
(subtract Line 6(b) from Line 6(a)) .....

1 0 8 2 5 0 0

7. Net Operating Expenditures

(a) Total Operating Expenditures  
(from Line 17) .....

5 6 0 9 2 4

(b) Total Offsets to Operating  
Expenditures (from Line 14) .....

0 0 0

(c) Net Operating Expenditures  
(subtract Line 7(b) from Line 7(a)) .....

5 6 0 9 2 4

8. Cash on Hand at Close of  
Reporting Period (from Line 27) .....

7 7 6 9 4 2

9. Debts and Obligations Owed TO  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

0 0 0

10. Debts and Obligations Owed BY  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

3 2 2 2 7 3

**For further information contact:**

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

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

12030790361

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Joe Selvaggi For Congress

Report Covering the Period: From:

02 / 01 / 2012

To:

03 / 31 / 2012

**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).....

9 3 7 5 0 0

(ii) Unitemized.....

1 4 5 0 0 0

(iii) TOTAL of contributions from individuals ▶

1 0 8 2 5 0 0

(b) Political Party Committees.....

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

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans)

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

1 0 8 2 5 0 0

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

13. LOANS:

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

2 6 0 2 8 6

(b) All Other Loans.....

6 1 9 8 7

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

3 2 2 2 7 3

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

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

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

1 4 0 4 7 7 3

12030790362

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	5 6 0 9 2 4	
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs) .....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS .....	6 6 9 0 7	
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6 2 7 8 3 1	

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0 0 0
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1 4 0 4 7 7 3
25. SUBTOTAL (add Line 23 and Line 24).....	1 4 0 4 7 7 3
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6 2 7 8 3 1
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	7 7 6 9 4 2

12030790363

**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 1 OF 3
	<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)  
Joe Selvaggi For Congress

**A.** Full Name (Last, First, Middle Initial)  
Donnelly, Pauline

Mailing Address  
49 Beacon Street

City State Zip Code  
Boston, Massachusetts 02108

FEC ID number of contributing federal political committee.  
**C** 0 0 5 1 2 4 6 7

Name of Employer Occupation  
Coldwell Banker Agent

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
1 8 0 0 0 0

Date of Receipt  
MM / DD / YYYY  
0 2 / 1 8 / 2 0 1 2

Amount of Each Receipt this Period  
1 8 0 0 0 0

**B.** Full Name (Last, First, Middle Initial)  
McCall, Mary

Mailing Address  
35 Ash Street

City State Zip Code  
Cambridge, Massachusetts 02138

FEC ID number of contributing federal political committee.  
**C** 0 0 5 1 2 4 6 7

Name of Employer Occupation  
Moffett, McCall & Co. self employed

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
5 0 0 0 0 0

Date of Receipt  
MM / DD / YYYY  
0 2 / 2 2 / 2 0 1 2

Amount of Each Receipt this Period  
5 0 0 0 0 0

**C.** Full Name (Last, First, Middle Initial)  
Selvaggi, Anthony

Mailing Address  
100 Rivers Edge Drive, #232

City State Zip Code  
Medford, Massachusetts 02155

FEC ID number of contributing federal political committee.  
**C** 0 0 5 1 2 4 6 7

Name of Employer Occupation  
retired

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
1 0 0 0 0 0

Date of Receipt  
MM / DD / YYYY  
0 2 / 2 5 / 2 0 1 2

Amount of Each Receipt this Period  
1 0 0 0 0 0

**SUBTOTAL** of Receipts This Page (optional)..... 3 3 0 0 0 0

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

12030790364

**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 2 OF 3
	<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)  
Joe Selvaggi For Congress

**A.** Full Name (Last, First, Middle Initial)  
Wickert, Matt

Mailing Address  
21 Beacon Street

City Boston, MA 02108

FEC ID number of contributing federal political committee. C 0 0 5 1 2 4 6 7

Name of Employer Vertex Pharmaceuticals Occupation Compliance

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1 5 0 0 0 0

Date of Receipt  
03 / 10 / 2012

Amount of Each Receipt this Period  
1 5 0 0 0 0

**B.** Full Name (Last, First, Middle Initial)  
Donnelly, Pauline

Mailing Address  
49 Beacon Street

City Boston, MA 02108

FEC ID number of contributing federal political committee. C 0 0 5 1 2 4 6 7

Name of Employer Caldwell Banker Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2 4 7 5 0 0

Date of Receipt  
03 / 13 / 2012

Amount of Each Receipt this Period  
6 7 5 0 0 0

**C.** Full Name (Last, First, Middle Initial)  
Noveck, Raymond N.

Mailing Address  
31 Karen Road

City Waban, MA 02468

FEC ID number of contributing federal political committee. C 0 0 5 1 2 4 6 7

Name of Employer Strategic Systems, Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4 0 0 0 0 0

Date of Receipt  
03 / 15 / 2012

Amount of Each Receipt this Period  
4 0 0 0 0 0

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

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

2 5 7 5 0 0

12030790365

**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 3 OF 3		
	<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)  
Joe Selvaggi For Congress

**A.** Full Name (Last, First, Middle Initial)  
Miskovic, Maureen

Mailing Address  
447 East 57th Street, #9B

City State Zip Code  
New York, NY 10022

FEC ID number of contributing federal political committee.  
C 0 0 5 1 2 4 6 7

Name of Employer Occupation  
UBS Chief Risk Officer

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2 0 0 0 0 0

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2012

Amount of Each Receipt this Period  
2 0 0 0 0 0

**B.** Full Name (Last, First, Middle Initial)  
Selvaggi, Anthony

Mailing Address  
100 Rivers Edge Drive, #232

City State Zip Code  
Medford, MA 02155

FEC ID number of contributing federal political committee.  
C 0 0 5 1 2 4 6 7

Name of Employer Occupation  
retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2 5 0 0 0 0

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2012

Amount of Each Receipt this Period  
1 5 0 0 0 0

**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  
MM / DD / YYYY

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... 3 5 0 0 0 0

**TOTAL** This Period (last page this line number only)..... 9 3 7 5 0 0

12030790366

**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 1 OF 2

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

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NAME OF COMMITTEE (In Full)  
Joe Selvaggi For Congress

Full Name (Last, First, Middle Initial)

**A. Robichaud, Holly**

Mailing Address  
60 New Driftway, Suite 18

City State Zip Code  
Scituate, Massachusetts 02066

Purpose of Disbursement  
consultant, Tuesday Associates

0 0 1  
Category/  
Type

Candidate Name  
Joe Selvaggi

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: MA District: 08

Date of Disbursement

0 3 / 1 5 / 2 0 1 2

Amount of Each Disbursement this Period

2 0 0 0 0 0

Full Name (Last, First, Middle Initial)

**B. Van der Vynckt, Eric**

Mailing Address  
781 Parker Street, #2

City State Zip Code  
Boston, MA 02120

Purpose of Disbursement  
photography

0 0 6  
Category/  
Type

Candidate Name  
Joe Selvaggi

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

0 3 / 2 4 / 2 0 1 2

Amount of Each Disbursement this Period

1 7 5 0 0

Full Name (Last, First, Middle Initial)

**C. Wickert, Matt**

Mailing Address  
21 Beacon Street, #4B

City State Zip Code  
Boston, MA 02108

Purpose of Disbursement  
In-Kind: technical support

0 0 3  
Category/  
Type

Candidate Name  
Joe Selvaggi

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

0 3 / 1 0 / 2 0 1 2

Amount of Each Disbursement this Period

1 5 0 0 0 0

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

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

3 6 7 5 0 0

12030790367



**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 2 OF 2

<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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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)  
Joe Selvaggi For Congress

Full Name (Last, First, Middle Initial)

**A. Omni Parker House**

Mailing Address  
60 School Street

City Boston, MA 02108 State Zip Code

Purpose of Disbursement  
Launch Party rental

0 0 7  
Category/  
Type

Candidate Name  
Joe Selvaggi

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

0 3 / 1 5 / 2 0 1 2

Amount of Each Disbursement this Period

1 6 3 1 4 3

Full Name (Last, First, Middle Initial)

**B. Pro Print**

Mailing Address  
410 Boylston Street

City Boston, MA 02116 State Zip Code

Purpose of Disbursement  
campaign materials

0 0 6  
Category/  
Type

Candidate Name  
Joe Selvaggi

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

0 3 / 1 3 / 2 0 1 2

Amount of Each Disbursement this Period

3 0 2 8 1

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

1 9 3 4 2 4

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

5 6 0 9 2 4

12030790368

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

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

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

NAME OF COMMITTEE (In Full)  
Joe Selvaggi For Congress

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Selvaggi, Joe

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
49 Beacon Street

City State ZIP Code  
Boston, MA 02108

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
2 6 0 2 8 6 0 0 0 2 6 0 2 8 6

**TERMS** Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y NONE 0 0 0 % (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)..... ▶ 2 6 0 2 8 6

**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.

12030790369

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

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Joe Selvaggi For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Wickert, Matt

Election:

Primary  
 General  
 Other (specify) ▼

Mailing Address

21 Beacon Street, #4B

City State ZIP Code  
Boston, MA 02108

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

6 1 9 8 7

0 0 0

6 1 9 8 7

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

0 2

2 8

2 0 1 2

M M

D D

NONE

0 0 0 % (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)..... ▶

6 1 9 8 7

TOTALS This Period (last page in this line only)..... ▶

3 2 2 2 7 3

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

12030790370

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Joe selvaggi For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Selvaggi, Joe

Mailing Address  
49 Beacon Street

City State Zip Code  
Boston, MA 02108

Nature of Debt (Purpose):  
Campaign materials i.e. printing materials, photography, room rentals for launch party etc.

Outstanding Balance Beginning This Period

2 6 0 2 8 6

Amount Incurred This Period

2 6 0 2 8 6

Payment This Period

0 0 0

Outstanding Balance at Close of This Period

2 6 0 2 8 6

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Wickert, Matt

Mailing Address  
21 Beacon Street, Apt. 4B

City State Zip Code  
Boston, MA 02108

Nature of Debt (Purpose):  
web registration and online donation start-up

Outstanding Balance Beginning This Period

6 1 9 8 7

Amount Incurred This Period

6 1 9 8 7

Payment This Period

0 0 0

Outstanding Balance at Close of This Period

6 1 9 8 7

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ▶

3 2 2 2 7 3

2) TOTALS This Period (last page this line number only) ▶

3 2 2 2 7 3

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶

0 0 0

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

3 2 2 2 7 3

12030790371

**FEC FORM 3Z (File with Form 3)**  
**CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS**  
 (To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)	Report Covering Period: From: <span style="border: 1px solid black; padding: 2px;">0 2</span> / <span style="border: 1px solid black; padding: 2px;">0 1</span> / <span style="border: 1px solid black; padding: 2px;">2 0 1 2</span> To: <span style="border: 1px solid black; padding: 2px;">0 3</span> / <span style="border: 1px solid black; padding: 2px;">3 1</span> / <span style="border: 1px solid black; padding: 2px;">2 0 1 2</span>
--	--

Committee Name	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A Joe Selvaggi For Congress	\$10,825.00	\$0.00
B Column Total Last Page Only.....		

	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A	\$0.00	\$0.00	\$10,825.00	\$0.00	\$2,602.86	\$619.00
B						

	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A	\$3,222.73	\$0.00	\$0.00	\$14,047.73	\$5,609.24	\$0.00
B						

	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
B						

	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A	\$0.00	\$669.07	\$6,278.31	\$0.00	\$7,769.42	\$0.00
B						

	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 8(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A	\$3,222.73	\$10,825.00	\$5,609.24			
B						

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Federal Election Commission  
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(3/2005)

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