

**FEC
FORM 3**

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

RECEIVED

2014 OCT 20 AM 10:17
Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. **FEC MAIL CENTER**
12FE4M5

MARC HAROLD FOR CONGRESS 2014

ADDRESS (number and street) PO BOX 3366

Check if different than previously reported. (ACC)

OAKTON VA 22124-

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE STATE DISTRICT

C00562371

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

VA 111

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 03/29/2014 through 09/30/2014

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 Carey Shaw

Signature of Treasurer [Signature] Date 10/15/2014

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

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

Mar Harrow for Congress 2014

Report Covering the Period: From:

03 ' **29** ' **2014**

To:

09 ' **30** ' **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))	6547.00	6547.00
(b) Total Contribution Refunds (from Line 20(d))	0	
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	6547.00	6547.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4483.20	4483.20
(b) Total Offsets to Operating Expenditures (from Line 14)	0	
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	4483.20	4483.20
8. Cash on Hand at Close of Reporting Period (from Line 27)	2063.79	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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

MARC HARROLD For Congress 2014

Report Covering the Period: From: **03** ' **29** ' **2014** To: **09** ' **30** ' **2014**

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).....

5,236.00

5,236.00

(ii) Unitemized.....

(iii) TOTAL of contributions from individuals ▶

5,236.00

5,236.00

(b) Political Party Committees.....

301.00

301.00

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

(d) The Candidate.....

1,010.00

1,010.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

6,547.00

6,547.00

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

N/A

13. LOANS:

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

N/A

(b) All Other Loans.....

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

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

N/A

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

N/A

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

6,547.00

NON-FUNCTIONAL

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	4483.21 4498.00	4483.21 4498.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	N/A	
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	N/A	
(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	N/A	
(b) Political Party Committees.....	N/A	
(c) Other Political Committees (such as PACs).....	N/A	
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	N/A	
21. OTHER DISBURSEMENTS	N/A	
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	4498.00 4,483.21	

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6,547.00
25. SUBTOTAL (add Line 23 and Line 24).....	6,547.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4498.00 4483.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2,063.79

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

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)
MARC HARROLD For Congress 2014

A. Full Name (Last, First, Middle Initial) Pierce, Rachel / Waide Jim			Date of Receipt 04 03 2014
Mailing Address 1110 Belvedere St.			Amount of Each Receipt this Period 500.00
City TUPELO	State MS	Zip Code 38804	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00
Name of Employer Waide & Associates, PA		Occupation Attorneys	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

B. Full Name (Last, First, Middle Initial) Pacheco, Sarah M.			Date of Receipt 04 28 2014
Mailing Address 5909 Craig Street			Amount of Each Receipt this Period 2,000.00
City Springfield	State VA	Zip Code 22150	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2,000.00
Name of Employer US Dept. Homeland Sec.		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2,000.00		

C. Full Name (Last, First, Middle Initial) Gorman Michael J.			Date of Receipt 04 30 2014
Mailing Address 13 SUTTON CASTLE, SHIELMARTIN Rd. SUTTON CA.			Amount of Each Receipt this Period 100.00
City DUBLIN	State Ireland	Zip Code	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00
Name of Employer Bar Bri		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

SUBTOTAL of Receipts This Page (optional).....	
TOTAL This Period (last page this line number only).....	2,600.00

4041 NW 111041

**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	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MARC HARROLD For Congress 2014

Full Name (Last, First, Middle Initial) A. HAMMER, Benjamin		Date of Receipt 06/06/2014
Mailing Address 3061 Mt. Vernon Avenue N308		Amount of Each Receipt this Period 50.00
City Alexandria	State VA	
Zip Code 22305-3204		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		
Name of Employer Glover Park Group	Occupation VP	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) B. REDPATH, William		Date of Receipt 07/12/2014
Mailing Address 827 Anthony Ct.		Amount of Each Receipt this Period 201.00
City LEESBURG	State VA	
Zip Code 20175		Amount of Each Receipt this Period 201.00
FEC ID number of contributing federal political committee. C		
Name of Employer BIA/Kelsy	Occupation BUSINESS APPRAISER	Amount of Each Receipt this Period 201.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C. HOWELL, Carla		Date of Receipt 07/12/2014
Mailing Address 14030 Golden Ct. Woodbridge		Amount of Each Receipt this Period 250.00
City Woodbridge	State VA	
Zip Code 22193		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer National Libertarian Party	Occupation Political Director	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	
TOTAL This Period (last page this line number only).....	501.00

14030 GOLDEN CT

**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	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MARC HARROW FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Storm Josef

Mailing Address
7620 Bertito Lane

City **Springfield** State **VA** Zip Code **22153**

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

Name of Employer **New Century US** Occupation **Comptroller**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt **09/12/2014**

Amount of Each Receipt this Period **25.00**

B. Full Name (Last, First, Middle Initial)
Platt Brian

Mailing Address
6221 Power Plant Ct.

City **Waldorf** State **MD** Zip Code **20603**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt **10/05/2014**

Amount of Each Receipt this Period **100.00**

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

Amount of Each Receipt this Period

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

TOTAL This Period (last page this line number only)..... **125.00**

140001-140001-140001

**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 type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MAIL HARROD for Congress 2014

A. Full Name (Last, First, Middle Initial)
LPVA Pol. Dev. Cmte

Mailing Address
P.O. BOX 28263

City **Richmond** State **VA** Zip Code **23228-0263**

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

Name of Employer **LPVA** Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
301.00

Date of Receipt
09/28/2014

Amount of Each Receipt this Period
301.00

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

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

Amount of Each Receipt this Period

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

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

301.00

140001-1000-10000

**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 11 OF 16		
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Marc Harrow for Congress 2014

A. Full Name (Last, First, Middle Initial) HARROW MARC M		Date of Receipt 04/19/2014
Mailing Address 4245 Summit Corner Dr # 255		Amount of Each Receipt this Period 1,000.00
City Fairfax	State VA Zip Code 22030	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1,000.00
Name of Employer THE HARROW FIRM PLLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1,000.00	

B. Full Name (Last, First, Middle Initial) HARROW MARC M		Date of Receipt 04/29/2014
Mailing Address 4245 Summit Corner Dr. # 255		Amount of Each Receipt this Period 1000
City Fairfax	State VA Zip Code 22030	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1,010.00
Name of Employer THE HARROW FIRM PLLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1,010.00	

C. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	1,010.00
TOTAL This Period (last page this line number only).....	1,010.00

11-0141-1001-1001-1001

**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)

<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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PAGE 12 OF 16

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)
Marc Harrow for Congress 2014

A. Federal Express

Full Name (Last, First, Middle Initial) _____

Date of Disbursement **06 02 2014**

Mailing Address **548 WEST BROAD ST.**

City **Falls Church** State **VA** Zip Code **22046**

Purpose of Disbursement **Overnight permits for Ballot Access** **001**

Candidate Name **MARC HARROW** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **VA** District: **11**

Amount of Each Disbursement this Period **29.29**

B. US Postal Service

Full Name (Last, First, Middle Initial) _____

Date of Disbursement **09 16 2014**

Mailing Address _____

City **OAKTON** State **VA** Zip Code **22124**

Purpose of Disbursement **MAIL House of Rep Ethics Form** **001**

Candidate Name **MARC HARROW** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **VA** District: **11**

Amount of Each Disbursement this Period **2.03**

C. Potter, Alan

Full Name (Last, First, Middle Initial) _____

Date of Disbursement **06 10 2014**

Mailing Address **216 Chestnut Hill Dr.**

City **Front Royal** State **VA** Zip Code **22630**

Purpose of Disbursement **BALLOT/PETITION DRIVE** **001**

Candidate Name **MARC HARROW** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **VA** District: **11**

Amount of Each Disbursement this Period **2,740.00**

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

TOTAL This Period (last page this line number only)..... **2,771.32**

1100011111

**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)
Marc Harrow for Congress 2014

Full Name (Last, First, Middle Initial) A. CAPITAL ONE BANK			Date of Disbursement 06/26/2014	
Mailing Address 925 15th Street NW			Amount of Each Disbursement this Period 15.00	
City Washington	State DC	Zip Code		
Purpose of Disbursement BANK SERVICE fee/maintenance		Category/Type 001		
Candidate Name MARC HARROW				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: VA	District: 11			

Full Name (Last, First, Middle Initial) B. CAPITAL ONE BANK			Date of Disbursement 09/30/2014	
Mailing Address 925 15th St. NW			Amount of Each Disbursement this Period 15.00	
City Washington	State DC	Zip Code		
Purpose of Disbursement BANK SERVICE FEE/maintenance		Category/Type 001		
Candidate Name MARC HARROW				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: VA	District: 11			

Full Name (Last, First, Middle Initial) C. VA LIB Victory Fund			Date of Disbursement 06/26/2014	
Mailing Address DO NOT HAVE			Amount of Each Disbursement this Period 25.00	
City	State	Zip Code		
Purpose of Disbursement FUNDRAISING COSTS ASSOC. W/ CONTRIBUTION		Category/Type 003		
Candidate Name MARC HARROW				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: VA	District: 11			

SUBTOTAL of Disbursements This Page (optional)	55.00
TOTAL This Period (last page this line number only)	

11-11-14

**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	<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)

Mar Harrow for Congress 2014

Full Name (Last, First, Middle Initial)

A. *PAYPAL*

Date of Disbursement

09/30/2014

Mailing Address

No Mailing Address Available

City State Zip Code

Amount of Each Disbursement this Period

14.60

Purpose of Disbursement

Fees to Accept Paypal Donations/Host

003
Category/
Type

Candidate Name

Mar Harrow for Congress 2014

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: *VA* District: *11*

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

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

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

14.60

11-11-11 11:11:11

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

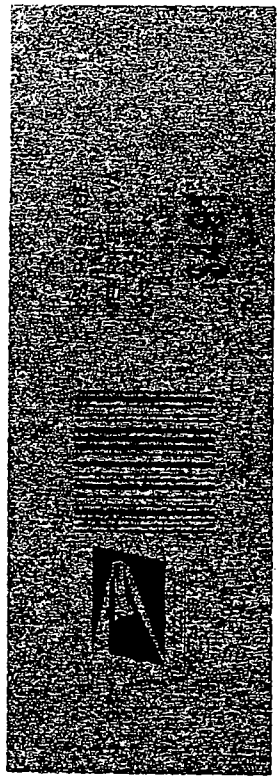
(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) Mark Harrow For Congress 2014		Report Covering Period: From: 03 / 29 / 2014 To: 09 / 30 / 2014				
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	Mark Harrow for Congress 2014	5236.00	301.00			
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	1,010.00	6,547.00	N/A	N/A	N/A
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	N/A	N/A	N/A	6,547.00	4483.21	N/A
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	N/A	N/A	N/A	N/A	N/A	N/A
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	N/A	N/A	4,483.21	0	2,063.79	0
B						
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A	0	6,547.00	4,483.21			
B						

143001110011001

30X 3366
Ton, VA

1411 NW 11 W 0411



22124

12 3460 0002 7540 5145

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
CERTIFIED MAIL™



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