

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Glenn Ivey for Congress

Report Covering the Period: From: / / To: / /

	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))....	0.00	142977.00
(b) Total Contribution Refunds (from Line 20(d))	54973.95	82901.27
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-54973.95	60075.73
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	0.00	60297.48
(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)).....	0.00	60297.48
8. Cash on Hand at Close of Reporting Period (from Line 27).....	19778.25	
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).....	20000.00	

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

Glenn Ivey 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).....	0.00	136800.00
(ii) Unitemized.....	0.00	5177.00
(iii) TOTAL of contributions from individuals ▶	0.00	141977.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	142977.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	20000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	20000.00
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)..... ▶	0.00	162977.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	0.00	60297.48
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	54684.65	82611.97
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	289.30	289.30
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	54973.95	82901.27
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	54973.95	143198.75

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	74752.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	74752.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	54973.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	19778.25

**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 5 OF 35
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Anthony Alexis		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 1820 Rupert St.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4646
City McLean	State VA	
Zip Code 22101	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) B. Michael Baader		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 2112 Fox Trail Ct.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4648
City Reisterstown	State MD	
Zip Code 21136	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) c. Gary Bair		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 9500 Barroll Lane		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4649
City Kensington	State MD	
Zip Code 20895	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

SUBTOTAL of Disbursements This Page (optional)	1157.19
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 6 OF 35
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Susan Leonard Bayly		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 6903 Forest Hill Dr.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4774
City University Park	State MD	
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: MD	District: 04	

Full Name (Last, First, Middle Initial) B. Sandy Berman		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 7850 Walker Drive		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4650
City Greenbelt	State MD	
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: MD	District: 04	

Full Name (Last, First, Middle Initial) c. Charlain Bland		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 10708 Tatum Ct.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4651
City Upper Marlboro	State MD	
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: MD	District: 04	

SUBTOTAL of Disbursements This Page (optional).....	1157.19
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 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Joseph Block		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 2750 Woodley Pl., NW		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4652
City Washington State DC Zip Code 20008	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) B. Andy Blocker		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 10204 Waterwell Way		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4653
City Laurel State MD Zip Code 20708	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) c. Denise Bowman		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 855 W. Mount Harmony Rd.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4654
City Owings State MD Zip Code 20736	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

SUBTOTAL of Disbursements This Page (optional).....	867.90
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 35
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Elizabeth Buck		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 3019 Solomons Island Rd.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4656
City Edgewater State MD Zip Code 21037	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) B. Steven Bunnell		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 6237 30th St., NW		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4657
City Washington State DC Zip Code 20015	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) c. Larry Burch		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 7829 Belle Point Drive		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4658
City Greenbelt State MD Zip Code 20770	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

SUBTOTAL of Disbursements This Page (optional).....	1446.48
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 35
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Cheye Calvo		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 8522 Edmonston Rd.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4660
City State Zip Code Berwyn Heights MD 20740	Purpose of Disbursement Pro-Rata Refund 010 Category/Type	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) B. Alan Cason		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 2758 Thornbrook Rd.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4662
City State Zip Code Ellicott City MD 21042	Purpose of Disbursement Pro-Rata Refund 010 Category/Type	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) c. Kay Casstevens		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 1418 Foxhall Rd., NW		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4663
City State Zip Code Washington DC 20007	Purpose of Disbursement Pro-Rata Refund 010 Category/Type	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

SUBTOTAL of Disbursements This Page (optional).....	867.90
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 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Andrea Cerulli		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 5719 Forest Ave		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4665
City Cheverlay	State MD	
Purpose of Disbursement Pro-Rata Refund	010	Category/ Type
Candidate Name Glenn Ivey for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD	District: 04	

Full Name (Last, First, Middle Initial) B. William Chesley		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 2200 Defense Highway		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4666
City Crofton	State MD	
Purpose of Disbursement Pro-Rata Refund	010	Category/ Type
Candidate Name Glenn Ivey for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD	District: 04	

Full Name (Last, First, Middle Initial) c. Emilio Cividanes		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 4223 Blagden Ave., NW		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4667
City Washington	State DC	
Purpose of Disbursement Pro-Rata Refund	010	Category/ Type
Candidate Name Glenn Ivey for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD	District: 04	

SUBTOTAL of Disbursements This Page (optional).....	1446.48
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 11 OF 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Thomas Connolly		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 1531 Forest Villa Lane		Amount of Each Disbursement this Period 433.94 Transaction ID : SB20A.4669
City McLean	State VA	
Zip Code 22101	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) B. William Cook Jr.		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 2916 Oak Shadow Dr.		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4670
City Oak Hill	State VA	
Zip Code 20171	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) c. James Cooper		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 4808 Nebraska Ave., NW		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4672
City Washington	State DC	
Zip Code 20016	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

SUBTOTAL of Disbursements This Page (optional).....	2169.72
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 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. J. Josphe Curran III			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012	
Mailing Address 1 W. Saint George Rd.			Amount of Each Disbursement this Period 578.59	
City Baltimore	State MD	Zip Code 21210	Transaction ID : SB20A.4673	
Purpose of Disbursement Pro-Rata Refund		Category/ Type 010		
Candidate Name Glenn Ivey for Congress				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: MD	District: 04			

Full Name (Last, First, Middle Initial) B. Wayne Curry			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012	
Mailing Address 14413 Waynesford Dr.			Amount of Each Disbursement this Period 578.59	
City Upper Marlboro	State MD	Zip Code 20740	Transaction ID : SB20A.4674	
Purpose of Disbursement Pro-Rata Refund		Category/ Type 010		
Candidate Name Glenn Ivey for Congress				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: MD	District: 04			

Full Name (Last, First, Middle Initial) c. Candace Damon			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012	
Mailing Address 459 Pacific St.			Amount of Each Disbursement this Period 289.30	
City Brooklyn	State NY	Zip Code 11217	Transaction ID : SB20A.4675	
Purpose of Disbursement Pro-Rata Refund		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1446.48
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 35	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Tanzania Davis		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 3231 Superior Lane Suite A22		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4677
City Bowie	State MD Zip Code 20715	
Purpose of Disbursement Pro-Rata Refund	Category/Type 010	
Candidate Name Glenn Ivey for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) B. Karen Errico		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 702 Petersburg Road		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4680
City Davidsonville	State MD Zip Code 21035	
Purpose of Disbursement Pro-Rata Refund	Category/Type 010	
Candidate Name Glenn Ivey for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) c. Jim Estopp		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 13804 W. End Farm Rd.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4681
City Upper Marlboro	State MD Zip Code 20772	
Purpose of Disbursement Pro-Rata Refund	Category/Type 010	
Candidate Name Glenn Ivey for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

SUBTOTAL of Disbursements This Page (optional).....	1446.48
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 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Michael Evans		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 7 Cheverly Circle		Amount of Each Disbursement this Period 578.59
City Cheverly	State MD	Zip Code 20785
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name	Transaction ID : SB20A.4682	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Wayne Ferrell		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 1666 K St., NW Suite 1200		Amount of Each Disbursement this Period 289.30
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name	Transaction ID : SB20A.4684	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) c. Geoffrey Garinther		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 11529 Falls Rd.		Amount of Each Disbursement this Period 578.59
City Lutherville	State MD	Zip Code 21093
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name	Transaction ID : SB20A.4686	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

SUBTOTAL of Disbursements This Page (optional).....	1446.48
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 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Gil Genn		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 611 Pennsylvania Ave., SE Suite 123		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4687
City Washington State DC Zip Code 20003	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) B. Michael Gollins		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 7611 Chestnut Ave.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4690
City Bowie State MD Zip Code 20715	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) c. Renata Gorman		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 7208 Spruce Ave.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4692
City Takoma Park State MD Zip Code 20912	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

SUBTOTAL of Disbursements This Page (optional).....	1157.19
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 35
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Julie Grohovsky		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 6847 Glenbrook Rd.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4693
City Bethesda	State MD	
Zip Code 20814	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) B. William Hall		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 5148 Tilden Street, NW		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4695
City Washington	State DC	
Zip Code 20016	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) c. W. Warren Hamel		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 160 Rugby Road		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4696
City Arnold	State MD	
Zip Code 21012	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

SUBTOTAL of Disbursements This Page (optional).....	1157.19
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 17 OF 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Vernon Herron		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 15070 Frederick Road		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4699
City Woodbine State MD Zip Code 21797	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) B. Stuart Ingis		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 7702 Marbury Rd.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4701
City Bethesda State MD Zip Code 20817	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) c. Vivian Ivey		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 1315 Mayflower Dr.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4702
City McLean State VA Zip Code 22101	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

SUBTOTAL of Disbursements This Page (optional).....	1157.19
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 18 OF 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Cynthia Kim		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 312 Flannery Lane		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4707
City Silver Spring	State MD	
Zip Code 20904	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) B. David Koshgarian		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 10066 Cotton Mill Lane		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4708
City Columbia	State MD	
Zip Code 21046	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) c. Jeffrey Kurzweil		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 809 Olde Georgetown Ct.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4709
City Great Falls	State VA	
Zip Code 22066	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

SUBTOTAL of Disbursements This Page (optional).....	1157.19
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 19 OF 35	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Alison J Lavigne MD		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 298 Rugby Cove		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4710
City Arnold	State MD	
Zip Code 21012	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" 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) 2012	State: MD District: 04	

Full Name (Last, First, Middle Initial) B. Alison J Lavigne MD		Date of Disbursement MM / DD / YYYY 06 / 27 / 2012
Mailing Address 298 Rugby Cove		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB20A.4776
City Arnold	State MD	
Zip Code 21012	Purpose of Disbursement Refund - General	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) c. Rene B Lavigne		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 298 Rugby Cove		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4712
City Arnold	State MD	
Zip Code 21012	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

SUBTOTAL of Disbursements This Page (optional).....	5392.96
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 20 OF 35	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Rene B Lavigne		Date of Disbursement MM / DD / YYYY 06 / 27 / 2012
Mailing Address 298 Rugby Cove		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB20A.4778
City Arnold	State MD	
Purpose of Disbursement Refund - General	Category/Type 010	
Candidate Name Glenn Ivey for Congress		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 04	

Full Name (Last, First, Middle Initial) B. Lisa Lawler		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 5400 Burling Rd.		Amount of Each Disbursement this Period 433.94 Transaction ID : SB20A.4713
City Bethesda	State MD	
Purpose of Disbursement Pro-Rata Refund	Category/Type 010	
Candidate Name Glenn Ivey for Congress		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 04	

Full Name (Last, First, Middle Initial) c. Andrew Levetown		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 700 12th St., NW Suite 700		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4717
City Washington	State DC	
Purpose of Disbursement Pro-Rata Refund	Category/Type 010	
Candidate Name Glenn Ivey for Congress		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 04	

SUBTOTAL of Disbursements This Page (optional).....	4380.42
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 21 OF 35	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Thomas Lingan		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 840 Oella Avenue Apt 422		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4718
City Ellicott City	State MD	
Zip Code 21043	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) B. Timothy Maloney		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 12312 Lima Dr.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4719
City Silver Spring	State MD	
Zip Code 20904	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) c. Joseph Malouf		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 244 Main St. Hamilton Hall		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4720
City Gaithersburg	State MD	
Zip Code 20878	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

SUBTOTAL of Disbursements This Page (optional).....	1446.48
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 22 OF 35	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Aris Mardirossian		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address P.O. Box 61220		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4721
City Potomac	State MD	
Zip Code 20859	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) B. Anthony Martin		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 7501 Greenway Center Dr. Suite 460		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4722
City Greenbelt	State MD	
Zip Code 20770	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) c. Steven McCool		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 2525 N. Kenilworth St.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4724
City Arlington	State VA	
Zip Code 22207	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

SUBTOTAL of Disbursements This Page (optional).....	2025.08
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 23 OF 35	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Ginger McKnight-Chavers		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 70 Rockledge Road		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4725
City Bronxville	State NY	
Zip Code 10708		Category/ Type 010
Purpose of Disbursement Pro-Rata Refund		
Candidate Name Glenn Ivey for Congress		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 04	

Full Name (Last, First, Middle Initial) B. Alan L Meltzer		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 6500 Rock Spring Drive Suite 500		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4770
City Bethesda	State MD	
Zip Code 20817		Category/ Type 010
Purpose of Disbursement Pro-Rata Refund		
Candidate Name Glenn Ivey for Congress		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 04	

Full Name (Last, First, Middle Initial) c. William Meyers		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 6801 Kenilworth Avenue Suite 400		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4726
City Riverdale	State MD	
Zip Code 20737		Category/ Type 010
Purpose of Disbursement Pro-Rata Refund		
Candidate Name Glenn Ivey for Congress		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 04	

SUBTOTAL of Disbursements This Page (optional).....	1446.48
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 24 OF 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. David Michael		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 1922 Chaparrall Ct.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4727
City Crownsville	State MD	
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: MD	District: 04	

Full Name (Last, First, Middle Initial) B. Gary Michael		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 190 Glen Oban Dr.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4728
City Arnold	State MD	
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: MD	District: 04	

Full Name (Last, First, Middle Initial) c. Kenneth Michael		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 10100 Business Pkwy		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4729
City Lanham	State MD	
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: MD	District: 04	

SUBTOTAL of Disbursements This Page (optional).....	1735.77
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 25 OF 35	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Thomas Mooney		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 4001 Remington Ct.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4730
City Hyattsville	State MD	
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: MD	District: 04	

Full Name (Last, First, Middle Initial) B. Jonathan Newton		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 14100 Farnsworth Lane Apt 2207		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4733
City Upper Marlboro	State MD	
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: MD	District: 04	

Full Name (Last, First, Middle Initial) c. Uriel Ochoa-Davis		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 5707 38th Ave.		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4734
City Hyattsville	State MD	
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: MD	District: 04	

SUBTOTAL of Disbursements This Page (optional).....	2314.37
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 26 OF 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Lawrence Parks II		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 2440 16th St., NW Apt 207		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4738
City Washington State DC Zip Code 20009	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) B. Lawrence Parks II		Date of Disbursement MM / DD / YYYY 06 / 27 / 2012
Mailing Address 2440 16th St., NW Apt 207		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB20A.4780
City Washington State DC Zip Code 20009	Purpose of Disbursement Refund - General Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) c. Anthony Pierce		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 3214 Chestnut St., NW		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4739
City Washington State DC Zip Code 20015	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

SUBTOTAL of Disbursements This Page (optional).....	4235.78
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 27 OF 35	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Mary Powell		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 2806 Crest Ave.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4740
City Cheverly	State MD	
Zip Code 20785		Category/ Type 010
Purpose of Disbursement Pro-Rata Refund		
Candidate Name Glenn Ivey for Congress		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 04	

Full Name (Last, First, Middle Initial) B. Thomas Quinn		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 575 7th St., NW		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4741
City Washington	State DC	
Zip Code 20004		Category/ Type 010
Purpose of Disbursement Pro-Rata Refund		
Candidate Name Glenn Ivey for Congress		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 04	

Full Name (Last, First, Middle Initial) c. Karl Racine		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 1309 T Street, NW Apt 2		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4742
City Washington	State DC	
Zip Code 20009		Category/ Type 010
Purpose of Disbursement Pro-Rata Refund		
Candidate Name Glenn Ivey for Congress		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD District: 04	

SUBTOTAL of Disbursements This Page (optional).....	2025.08
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 28 OF 35	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Melissa Reinberg		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 4532 Reno Rd., NW		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4744
City Washington State DC Zip Code 20008	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) B. Andre R Rogers		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 15511 HumberSide Way		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4771
City Upper Marlboro State MD Zip Code 20774	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) c. Nanda Sen		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 10548 Patuxent Ridge Way		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4746
City Laurel State MD Zip Code 20723	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

SUBTOTAL of Disbursements This Page (optional).....	867.90
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 29 OF 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Peter Shapiro		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 5514 33rd St., NW		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4747
City Washington State DC Zip Code 20015	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) B. Robert Smith		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 1117 10th St., NW Apt 1105		Amount of Each Disbursement this Period 867.89 Transaction ID : SB20A.4750
City Washington State DC Zip Code 20001	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) c. W. Scott Sonntag		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 7501 Greenway Center Drive Suite 460		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4751
City Greenbelt State MD Zip Code 20770	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

SUBTOTAL of Disbursements This Page (optional).....	1446.49
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 30 OF 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Mark Srere		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 1813 Kenyon St., NW		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4752
City Washington State DC Zip Code 20010	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) B. Judson Starr		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 575 7th St., NW		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4753
City Washington State DC Zip Code 20004	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) c. Aubreana Stephenson-Holder		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 9813 Oxbridge Way		Amount of Each Disbursement this Period 1446.48 Transaction ID : SB20A.4754
City Mitchellville State MD Zip Code 20721	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

SUBTOTAL of Disbursements This Page (optional).....	2314.37
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 31 OF 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Sylvia Syphax		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 609 60th Place		Amount of Each Disbursement this Period 433.94 Transaction ID : SB20A.4758
City Capital Heights	State MD	
Zip Code 20743	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) B. Linda Thatcher		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 2004 Bermondsey Dr.		Amount of Each Disbursement this Period 578.59 Transaction ID : SB20A.4761
City Mitchellville	State MD	
Zip Code 20721	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

Full Name (Last, First, Middle Initial) c. Barbara Van Gelder		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 320 Mansion Dr.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4763
City Alexandria	State VA	
Zip Code 22302	Purpose of Disbursement Pro-Rata Refund	Category/ Type 010
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 04	

SUBTOTAL of Disbursements This Page (optional).....	1301.83
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 32 OF 35	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Michael Winer		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 7829 Belle Point Dr.		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4768
City Greenbelt State MD Zip Code 20770	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) B. Irene Zuckerman		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 10505 Stapleford Hall Drive		Amount of Each Disbursement this Period 289.30 Transaction ID : SB20A.4769
City Potomac State MD Zip Code 20854	Purpose of Disbursement Pro-Rata Refund Category/Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 04		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	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).....	578.60
TOTAL This Period (last page this line number only).....	49592.67

**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 33 OF 35	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Glenn Ivey for Congress

Full Name (Last, First, Middle Initial) A. Friends of Victor Ramirez		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address PO Box 166		Amount of Each Disbursement this Period \$ 289.30 Transaction ID : SB20C.4773
City Mount Rainier	State MD	
Purpose of Disbursement Pro-Rata Refund	Category/ Type 010	
Candidate Name Glenn Ivey for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: MD	District: 04	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement	Category/ Type	
Candidate Name	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:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement	Category/ Type	
Candidate Name	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).....	\$ 289.30
TOTAL This Period (last page this line number only).....	\$ 289.30

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Glenn Ivey for Congress** Transaction ID : **SC/10.4507**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
GLENN F IVEY Primary
 Mailing Address PO BOX 6408 General
 Other (specify) ▼

City State ZIP Code
 LARGO MD 20792

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS Date Incurred Date Due Interest Rate Secured:
 M 11 / D 14 / Y 2011 M M / D D / Y Demand 0.00 % (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)..... ▶ 10000.00
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) **Glenn Ivey for Congress** Transaction ID : **SC/10.4508**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
GLENN F IVEY Primary
 Mailing Address PO BOX 6408 General
 Other (specify) ▼

City State ZIP Code
 LARGO MD 20792

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS Date Incurred Date Due Interest Rate Secured:
 M 11 / D 23 / Y 2011 M M / D D / Y Demand 0.00 % (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).....	▶	10000.00
TOTALS This Period (last page in this line only).....	▶	20000.00

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