

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Marjorie 2014

ADDRESS (number and street)

PO Box 444

Check if different than previously reported. (ACC)

Conshohocken

PA

19428

2. FEC IDENTIFICATION NUMBER ▼

C C00545301

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

PA

13

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2014

through

M M /

D D /

Y Y Y Y 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 Jennifer May

Signature of Treasurer Jennifer May

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2015

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Marjorie 2014**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	1108539.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	179788.92
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	928750.08
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	6254.51	1269101.84
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	228876.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	6254.51	1040225.84
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	-5788.11	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	227989.50	

**For further information contact:**

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Marjorie 2014

Report Covering the Period: From: 10 / 01 / 2014 To: 12 / 31 / 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 04 / 2014 (date of general election)	COLUMN C Total for 11 / 05 / 2014 (date after general election)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
0.00	1009451.00	0.00
(ii) Unitemized		
0.00	32388.00	0.00
(iii) Total of contributions from individuals		
0.00	1041839.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
0.00	66700.00	0.00

# POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
0.00	1108539.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	120000.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	120000.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	228876.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
0.00	1457415.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

Marjorie 2014

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

**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
6254.51	1269101.84	5029.51
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
0.00	171188.92	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	8600.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	179788.92	0.00
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**21. OTHER DISBURSEMENTS**

0.00	8282.84	0.00
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**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

6254.51	1457173.60	5029.51
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

0.00	928750.08	0.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

6254.51	1040225.84	5029.51
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	466.40
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	466.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6254.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	-5788.11

**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 11			
	<input checked="" type="checkbox"/> 17 <input 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	

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)  
**Marjorie 2014**

Full Name (Last, First, Middle Initial) <b>A. Next Level Partners, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 14 / 2014</b>
Mailing Address 410 1st St SE Ste 310		Amount of Each Disbursement this Period <b>500.00</b>
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Consultant - Compliance	<b>Transaction ID : VN7NF9WPRX5</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Next Level Partners, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 10 / 2014</b>
Mailing Address 410 1st St SE Ste 310		Amount of Each Disbursement this Period <b>5000.00</b>
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Consultant - Compliance	<b>Transaction ID : VN7NF9YJHA4</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 14 / 2014</b>
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period <b>725.00</b>
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Software	<b>Transaction ID : VN7NF9WPRY3</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6225.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>6225.00</b>

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

NAME OF COMMITTEE (In Full) **Marjorie 2014** Transaction ID : VN8MQCR5AT1L

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

Mailing Address  
 3701 Chestnut St  
 Fl 6  
 City State ZIP Code  
 Philadelphia PA 19104-3104

Original Amount of Loan 120000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 120000.00
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**TERMS**  
 Date Incurred: M 05 / D 19 / Y 2014  
 Date Due: M 12 / D 31 / Y 2014  
 Interest Rate: none % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	[ ] 120000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ] 120000.00

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



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Marjorie 2014**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Linda August</b>	Nature of Debt (Purpose): Consultant - Fundraising
Mailing Address 2401 Pennsylvania Ave 6B23	
City State Zip Code Philadelphia PA 19130-3002	

Outstanding Balance Beginning This Period 28000.00	Transaction ID : VN5PZ9HA602	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 28000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Erickson &amp; Company, Inc.</b>	Nature of Debt (Purpose): Consultant - Fundraising
Mailing Address 38 Ivy St SE	
City State Zip Code Washington DC 20003-4006	

Outstanding Balance Beginning This Period 12000.00	Transaction ID : VN5PZ9HA628	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Front Stoop Strategies, LLC</b>	Nature of Debt (Purpose): Consultant - Strategy
Mailing Address PO Box 444	
City State Zip Code Conshohocken PA 19428-0444	

Outstanding Balance Beginning This Period 3000.00	Transaction ID : VN5PZ9HA635	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	43000.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 11
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Marjorie 2014**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Joe Trippi &amp; Associates Inc.</b>	Nature of Debt (Purpose): Consultant - Website
Mailing Address 606A N Talbot St Ste 303	
City State Zip Code Saint Michaels MD 21663-2110	

Outstanding Balance Beginning This Period 10500.00	Transaction ID : VN5PZ9HA669	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jones &amp; Associates</b>	Nature of Debt (Purpose): Voter Contact
Mailing Address 30 Twig Ln	
City State Zip Code Willingboro NJ 08046-3835	

Outstanding Balance Beginning This Period 22500.00	Transaction ID : VN5PZ9HA610	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Katz Watson Group, Inc.</b>	Nature of Debt (Purpose): Consultant - Fundraising
Mailing Address 236 Massachusetts Ave NE Ste 602	
City State Zip Code Washington DC 20002-4971	

Outstanding Balance Beginning This Period 22000.00	Transaction ID : VN5PZ9HA643	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22000.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	55000.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 11
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Marjorie 2014**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Next Level Partners, LLC</b>	Nature of Debt (Purpose): Consultant - Compliance
Mailing Address 410 1st St SE Ste 310	
City State Zip Code Washington DC 20003-1819	

Outstanding Balance Beginning This Period 5000.00	Transaction ID : VN5PZ9HA651	
Amount Incurred This Period 0.00	Payment This Period 5000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Perkins Coie</b>	Nature of Debt (Purpose): Legal Fees
Mailing Address 700 13th St NW Ste 600	
City State Zip Code Washington DC 20005-5998	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VN5PZ9HAS11	
Amount Incurred This Period 9989.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 9989.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	9989.50
2) <b>TOTALS</b> This Period (last page this line number only) .....	107989.50
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	120000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	227989.50