FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
12 APR 26 PM 12: 26

Office Use Only

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

John Mangelli for U.S. Senate

ADDRESS (number and street) ▼ 82 A Bayville Ave

☐ Check if different than previously reported. (ACC)

CITY ▲ Bayville STATE ▲ NY ZIP CODE ▲ 11709 -

2. **FEC IDENTIFICATION NUMBER ▼** C00515619

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

STATE ▼ DISTRICT NY

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

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

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

Election on MM / DD / YYYY in the State of

5. Covering Period 02 / 02 / 2012 through 03 / 31 / 2012

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 Valerie Mangelli

Signature of Treasurer Valerie Mangelli Date 04 / 26 / 2012

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)

FE5AN018

12020210655

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name: John Mangelli For U.S. Senate.

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	90,000.00	
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	90,000.00	
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	73,402.23	
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	73,402.23	
8. Cash on Hand at Close of Reporting Period (from Line 27)	73,402.23	
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	0	

For further information contact:

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

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

12020210655

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

John Mangelli For U.S. Senate

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)		
(ii) Unitemized		
(iii) TOTAL of contributions from individuals ▶		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) The Candidate	9,000.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	9,000.00	
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0	
(b) All Other Loans	0	
(c) TOTAL LOANS (add Lines 13(a) and (b))	0	
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0	
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	9,000.00	

12020210657

FE5AN018

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	734023	
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0	
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	
(b) Political Party Committees	0	
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0	
21. OTHER DISBURSEMENTS	0	
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	734023	

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	90.00 00
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	90.00 00
25. SUBTOTAL (add Line 23 and Line 24)	000
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	734023
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	734023

12020210558

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☒ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full): John Mangelli For U.S. Senate

A.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☑ General ☐ Other (specify)
Election Cycle-to-Date: 10000.00
Date of Receipt: 02/02/2012
Amount of Each Receipt this Period: 10000.00
In kind contribution marketing Joyce Herring. Check

B.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☑ General ☐ Other (specify)
Election Cycle-to-Date: 20000.00
Date of Receipt: 02/02/2012
Amount of Each Receipt this Period: 1000.00
In kind contribution Culture zone radio ad Check

C.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☒ General ☐ Other (specify)
Election Cycle-to-Date: 5001.00
Date of Receipt: 02/29/2012
Amount of Each Receipt this Period: 3001.00
In kind contribution R&P promotions - check

SUBTOTAL of Receipts This Page (optional): 5001.00

TOTAL This Period (last page this line number only): 5001.00

12020210659

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full): John Mangelli for U.S. Senate

A.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☑ General ☐ Other (specify)
Election Cycle-to-Date: 5,258.21
Date of Receipt: 03/29/2012
Amount of Each Receipt this Period: 257.21
In kind contribution Staples - debit card.

B.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☑ General ☐ Other (specify)
Election Cycle-to-Date: 5,366.90
Date of Receipt: 03/19/2012
Amount of Each Receipt this Period: 108.69
In kind contribution Green Party dinner debit card

C.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 5,495.90
Date of Receipt: 03/15/2012
Amount of Each Receipt this Period: 129.00
In kind contribution web.com website

SUBTOTAL of Receipts This Page (optional): 494.90

TOTAL This Period (last page this line number only): 5,495.90

12020210550

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) ☐ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full): John Mangelli for U.S. Senate

A.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☑ General ☐ Other (specify)
Election Cycle-to-Date: 6,995.90
Date of Receipt: 03/05/2012
Amount of Each Receipt this Period: 1,000.00
In Kind Contribution Culture Zone Radio Ad

B.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☑ General ☐ Other (specify)
Election Cycle-to-Date: 6,995.90
Date of Receipt: 03/26/2012
Amount of Each Receipt this Period: 500.00
In Kind Contribution Joyce Herring

C.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☑ General ☐ Other (specify)
Election Cycle-to-Date: 7,095.90
Date of Receipt: 03/20/2012
Amount of Each Receipt this Period: 100.00
In Kind Contribution Gas Debit Card

SUBTOTAL of Receipts This Page (optional): 1600.00

TOTAL This Period (last page this line number only): 7,095.90

12020210561

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☑ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full): John Mangelli for U.S. Senate

A.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☑ General ☐ Other (specify)
Election Cycle-to-Date: 7,124.90
Date of Receipt: 03 / 19 / 2012
Amount of Each Receipt this Period: 29.00
In kind contribution parking debit card

B.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☑ General ☐ Other (specify)
Election Cycle-to-Date: 7,219.97
Date of Receipt: 03 / 15 / 2012
Amount of Each Receipt this Period: 95.07
In kind contribution check printing charge

C.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☒ General ☐ Other (specify)
Election Cycle-to-Date: 7,225.87
Date of Receipt: 03 / 08 / 2012
Amount of Each Receipt this Period: 5.90
In kind contribution postage

SUBTOTAL of Receipts This Page (optional): 129.97

TOTAL This Period (last page this line number only): 7,225.87

12020210662

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) ☐ 11a ☐ 11b ☐ 11c ☑ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full): John Mangelli For U.S. Senate

A.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☑ General ☐ Other (specify)
Election Cycle-to-Date: 7,336.23
Date of Receipt: 03/13/2012
Amount of Each Receipt this Period: 1036
In Kind Contribution American Flag

B.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Self Occupation: Attorney
Receipt For: ☐ Primary ☑ General ☐ Other (specify)
Election Cycle-to-Date: 7,340.23
Date of Receipt: MM / DD / YYYY
Amount of Each Receipt this Period: 4.00
In Kind Contribution Parking

C.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
FEC ID number of contributing federal political committee: C00515619
Name of Employer: Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date:
Date of Receipt: MM / DD / YYYY
Amount of Each Receipt this Period:
In Kind Contribution

SUBTOTAL of Receipts This Page (optional): 1040.36

TOTAL This Period (last page this line number only): 7,340.23

12020210653

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) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full): John Mangelli For U.S. Senate

A.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: marketing personel
Candidate Name: John Mangelli
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 02/02/2012
Amount of Each Disbursement this Period: 1000.00
In Kind Contributions

B.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Radio AD
Candidate Name: John Mangelli
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☑ General ☐ Other (specify)
Date of Disbursement: 02/02/2012
Amount of Each Disbursement this Period: 1000.00
In Kind contribution

C.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Promotional
Candidate Name: John Mangelli
Category/Type: 006
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☑ General ☐ Other (specify)
Date of Disbursement: 02/29/2012
Amount of Each Disbursement this Period: 3001.00
In Kind contribution

SUBTOTAL of Disbursements This Page (optional) 5001.00

TOTAL This Period (last page this line number only) 5001.00

12020210664

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) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

PAGE 2 OF 5

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NAME OF COMMITTEE (In Full): John Mangelli For U.S. Senate

A.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Staples - office supplies
Candidate Name: John Mangelli
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 03 / 29 / 2012
Amount of Each Disbursement this Period: 257.21
In Kind Contributions

B.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Food, Dinner - Political Function
Candidate Name: John Mangelli
Category/Type: 007
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☑ General ☐ Other (specify)
Date of Disbursement: 03 / 19 / 2012
Amount of Each Disbursement this Period: 108.69
In Kind Contribution

C.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Web site.
Candidate Name: John Mangelli
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☑ General ☐ Other (specify)
Date of Disbursement: 03 / 15 / 2012
Amount of Each Disbursement this Period: 129.00
In Kind Contribution

SUBTOTAL of Disbursements This Page (optional) 494.90

TOTAL This Period (last page this line number only) 549.90

12020210565

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) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full): John Mangelli For U.S. Senate

A.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Radio AD
Candidate Name: John Mangelli
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 03 / 05 / 2012
Amount of Each Disbursement this Period: 1000.00
In Kind Contributions

B.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Marketing Personel
Candidate Name: John Mangelli
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☑ General ☐ Other (specify)
Date of Disbursement: 03 / 26 / 2012
Amount of Each Disbursement this Period: 500.00
In Kind contribution

C.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Gas
Candidate Name: John Mangelli
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☑ General ☐ Other (specify)
Date of Disbursement: 03 / 26 / 2012
Amount of Each Disbursement this Period: 100.00
In Kind contribution

SUBTOTAL of Disbursements This Page (optional): 1600.00

TOTAL This Period (last page this line number only): 7095.90

12020210666

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) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full): John Mangelli For U.S. Senate

A.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Parking
Candidate Name: John Mangelli
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 03 / 19 / 2012
Amount of Each Disbursement this Period: 29.00
In Kind Contributions

B.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Check Printing Fee
Candidate Name: John Mangelli
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☑ General ☐ Other (specify)
Date of Disbursement: 03 / 15 / 2012
Amount of Each Disbursement this Period: 95.07
In Kind Contribution

C.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Postage
Candidate Name: John Mangelli
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☑ General ☐ Other (specify)
Date of Disbursement: 03 / 08 / 2012
Amount of Each Disbursement this Period: 5.90
In Kind Contribution

SUBTOTAL of Disbursements This Page (optional) 12997

TOTAL This Period (last page this line number only) 722587

12020210567

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) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full): John Mangelli For U.S. Senate

A.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Flag
Candidate Name: John Mangelli
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 03 / 13 / 2012
Amount of Each Disbursement this Period: 1036
In Kind Contributions

B.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement: Parking
Candidate Name: John Mangelli
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☑ General ☐ Other (specify)
Date of Disbursement: 03 / 08 / 2012
Amount of Each Disbursement this Period: 400
In Kind contribution

C.
Full Name (Last, First, Middle Initial): Mangelli, John
Mailing Address: 82A Bayville Ave
City: Bayville State: NY Zip Code: 11709
Purpose of Disbursement:
Candidate Name: John Mangelli
Category/Type:
Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:
Disbursement For: ☐ Primary ☑ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:
In Kind contribution

SUBTOTAL of Disbursements This Page (optional) 1436

TOTAL This Period (last page this line number only) 734023

12020210668

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE OF

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

NAME OF COMMITTEE (In Full) John Mangelli for U.S. Senate

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

Mailing Address

City State ZIP Code

Election: ☐ Primary ☐ General ☐ Other (specify) ▼

Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period

TERMS

Date Incurred M M / D D / Y Y Y Y

Date Due M M / D D / Y Y Y Y

Interest Rate % (apr)

Secured: ☐ Yes ☐ No

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

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

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

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

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

SUBTOTALS This Period This Page (optional) ▶ 0

TOTALS This Period (last page in this line only) ▶ 0

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

12020210669

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for Information found on Page _____ of Schedule C

NAME OF COMMITTEE (In Full): John Mangelli For U.S. Senate

FEC IDENTIFICATION NUMBER: C00515619

LENDING INSTITUTION (LENDER)
Full Name

Amount of Loan

Interest Rate (APR) %

Mailing Address

City State Zip Code

Date Incurred or Established MM / DD / YYYY

Date Due MM / DD / YYYY

A. Has loan been restructured? ☐ No ☐ Yes If yes, date originally incurred MM / DD / YYYY

B. If line of credit,
Amount of this Draw:
Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?
☐ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
☐ No ☐ Yes If yes, specify:

What is the value of this collateral?

Does the lender have a perfected security interest in it? ☐ No ☐ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? ☐ No ☐ Yes If yes, specify:

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Date account established: MM / DD / YYYY

Location of account:

Address:

City, State, Zip:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER
Typed Name: Valerie Mangelli
Signature: Valerie Mangelli

DATE MM / DD / YYYY

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE
Typed Name
Signature
Title

DATE MM / DD / YYYY

12020210670

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

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

PAGE OF

FOR LINE NUMBER: (check only one) ☐ 9 ☐ 10

NAME OF COMMITTEE (In Full): John Mangelli for U.S. Senate

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

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

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

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

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FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)	Report Covering Period: From:	To:
John Mangelli For U.S. Senate	02 / 02 / 2012	03 / 31 / 2012

	Committee Name	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A	John Mangelli For U.S. Senate	0	0
B	Column Total Last Page Only.....		

	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A	0	9,000.00	9,000.00	0	0	0
B						

	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A	0	0	0	9,000.00	7,340.23	0
B						

	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Candidate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A	0	0	0	0	0	0
B						

	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A	0	0	7,340.23	9,000.00	7,340.23	0
B						

	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A	0	9,000.00	7,340.23			
B						

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PO ZIP Code	Day of Delivery ☐ Next ☐ 2nd ☐ 2nd Del. Day	Postage $
Date Accepted Mo. Day Year	Scheduled Date of Delivery Month Day	Return Receipt Fee $
Time Accepted ☐ AM ☐ PM	Scheduled Time of Delivery ☐ Noon ☐ 3 PM	COD Fee $ / Insurance Fee $
Flat Rate ☐ or Weight lbs. ozs.	Military ☐ 2nd Day ☐ 3rd Day	Total Postage & Fees $
	Int'l Alpha Country Code	Acceptance Emp. Initials

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Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Sig
Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Sig
Delivery Date Mo. Day	Time ☐ AM ☐ PM	Employee Sig

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Additional merchandise
customer requests waiver
I wish delivery to be made wi
of addressee or addressee's
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Date Accepted Mo. Day Year	Scheduled Date of Delivery Month Day	Return Receipt Fee $
Time Accepted ☐ AM ☐ PM	Scheduled Time of Delivery ☐ Noon ☐ 3 PM	COD Fee $ / Insurance Fee $
Flat Rate ☐ or Weight lbs. ozs.	Military ☐ 2nd Day ☐ 3rd Day	Total Postage & Fees $
	Int'l Alpha Country Code	Acceptance Emp. Initials

DELIVERY (POSTAL USE ONLY)

Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Delivery Date Mo. Day	Time ☐ AM ☐ PM	Employee Signature

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☐ **NO DELIVERY** Weekend Holiday ☐ Mailer Signature

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B.

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THE LAW OFFICES OF JOHN MANGELLI
82A BAYVILLE AVENUE
BAYVILLE, NEW YORK 11709

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
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PHONE: (202) 224-0322

United States Senate

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