

# 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

05

20

2014

in the State of

PA

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

04

01

2014

through

04

30

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jennifer May

Signature of Treasurer Jennifer May

[Electronically Filed]

Date

05

08

2014

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

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<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 93334.00                | 938266.00                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 1600.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 93334.00                | 936666.00                          |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 98791.81                | 777534.40                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 98791.81                | 777534.40                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 151448.76               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 0.00                    |                                    |

**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

**Marjorie 2014**

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

| I. RECEIPTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>  |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                    |
| (i) Itemized (use Schedule A).....   | 87567.00                      | 847401.00                          |
| (ii) Unitemized.....   | 1767.00                       | 30265.00                           |
| (iii) TOTAL of contributions from individuals ▶  | 89334.00                      | 877666.00                          |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees (such as PACs).....   | 4000.00                       | 60600.00                           |
| (d) The Candidate.....   | 0.00                          | 0.00                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 93334.00                      | 938266.00                          |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>  | 0.00                          | 0.00                               |
| <b>13. LOANS:</b>  |                               |                                    |
| (a) Made or Guaranteed by the Candidate.....   | 0.00                          | 0.00                               |
| (b) All Other Loans.....   | 0.00                          | 0.00                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....   | 0.00                          | 0.00                               |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>                                | 0.00                          | 0.00                               |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>  | 0.00                          | 0.00                               |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 93334.00                      | 938266.00                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 98791.81                      | 777534.40                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 1600.00                            |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 1600.00                            |
| 21. OTHER DISBURSEMENTS .....  | 2882.84                       | 7682.84                            |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 101674.65                     | 786817.24                          |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 159789.41 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 93334.00  |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 253123.41 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 101674.65 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 151448.76 |

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 5 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**Nina Ahmad**

Mailing Address 405 E Gowen Ave

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Philadelphia | PA    | 19119-1025 |

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

|                  |                            |
|------------------|----------------------------|
| Name of Employer | Occupation                 |
| JNA Capital, Inc | Finance/Government Affairs |

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2014

**Transaction ID : VN8MQCNNYD0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Manawar Alam**

Mailing Address 1866 Merlin PI

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Philadelphia | PA    | 19116-3840 |

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

|                          |                          |
|--------------------------|--------------------------|
| Name of Employer         | Occupation               |
| Cardone Industries, Inc. | Senior Supply Strategist |

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 10 / 2014

**Transaction ID : VN8MQCMMM1**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Manawar Alam**

Mailing Address 1866 Merlin PI

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Philadelphia | PA    | 19116-3840 |

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

|                          |                          |
|--------------------------|--------------------------|
| Name of Employer         | Occupation               |
| Cardone Industries, Inc. | Senior Supply Strategist |

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 10 / 2014

**Transaction ID : VN8MQCMTAS1**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2400.00

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

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

\_\_\_\_\_ 7600.00

\_\_\_\_\_

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 6 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**Howard Asher**

Mailing Address 233 S 6th St  
Apt 1207

City Philadelphia State PA Zip Code 19106-3753

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : VN8MQCHD9E3**

Amount of Each Receipt this Period  
 1000.00

1100.00

**B.** Full Name (Last, First, Middle Initial)  
**Benjamin Barber**

Mailing Address 370 Riverside Dr

City New York State NY Zip Code 10025-2179

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

Name of Employer City University of New York Occupation Senior Research Scholar

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : VN8MQCPFTR4**

Amount of Each Receipt this Period  
 1000.00

1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Josh Becker**

Mailing Address 2098 Valparaiso Ave

City Menlo Park State CA Zip Code 94025-6054

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

Name of Employer Lex Machina Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 19 / 2014

**Transaction ID : VN8MQCNBMF7**

Amount of Each Receipt this Period  
 500.00

500.00

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

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

2500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 7 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**Stuart L. Berman**

Mailing Address 695 Cherrydale Dr

City Lafayette Hill State PA Zip Code 19444-2316

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

Name of Employer Kessler Topaz Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : VN8MQCN3QF1**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Tracy Bernstein**

Mailing Address 4409 Klingle St NW

City Washington State DC Zip Code 20016-3578

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

Name of Employer the bernstein companies Occupation consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : VN8MQCNR761**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Darren Check**

Mailing Address 280 King Of Prussia Rd

City Radnor State PA Zip Code 19087-5110

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

Name of Employer Kessler Topaz Meltzer & Check, LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : VN8MQCN3QN8**

Amount of Each Receipt this Period  
 500.00

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

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

1250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 8 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**Will Chou**

Mailing Address 250 E 35th St  
2C

City New York State NY Zip Code 10016-4240

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

Name of Employer NYU Langone Medical Center Occupation Assistant Research Scientist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : VN8MQCNXP21**

Amount of Each Receipt this Period  
 217.00

**B.** Full Name (Last, First, Middle Initial)  
**Tony Coelho**

Mailing Address 51 Baltimore Ave  
# 2

City Rehoboth Beach State DE Zip Code 19971-2131

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

Name of Employer Sotheby's International Realty Occupation Consultant / Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : VN8MQCHDGN2**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**James L. Cooper**

Mailing Address 7809 Bayshore Dr

City Margate City State NJ Zip Code 08402-1803

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2014

**Transaction ID : VN8MQCNNYC2**

Amount of Each Receipt this Period  
 1000.00

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

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

1717.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 9 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**Patrick J. Cunnane**

Mailing Address 795 Glen Rd

City Rydal State PA Zip Code 19046-1528

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

Name of Employer Advanced Sports, Inc Occupation sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8MQCP2Y85**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**Alexis Denny Kaufmann**

Mailing Address 2930 Upton St NW

City Washington State DC Zip Code 20008-1151

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

Name of Employer USAID Occupation Diplomat

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 29 / 2014**

**Transaction ID : VN8MQCP2KQ1**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Barbaralee Diamonstein-Spielvogel**

Mailing Address 720 Park Ave

City New York State NY Zip Code 10021-4954

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

Name of Employer N/A Occupation Philanthropist/Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 21 / 2014**

**Transaction ID : VN8MQCNEMX1**

Amount of Each Receipt this Period  
**500.00**

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

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

**3600.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 10 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Paula DiPerna**

Mailing Address 230 E 71st St.

City State Zip Code  
Cooperstown NY 13326

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

Name of Employer Occupation  
Executive/Consultant Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 24 / 2014**

**Transaction ID : VN8MQCNNQ21**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Laverne Durkson**

Mailing Address 4614 Canton St

City State Zip Code  
Philadelphia PA 19127-2001

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 22 / 2014**

**Transaction ID : VN8MQCNM895**

Amount of Each Receipt this Period  
**2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Laverne Durkson**

Mailing Address 4614 Canton St

City State Zip Code  
Philadelphia PA 19127-2001

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 22 / 2014**

**Transaction ID : VN8MQCNM8A3**

Amount of Each Receipt this Period  
**2400.00**

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

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

**5250.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 11 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Kelly Ernst**

Mailing Address 9 Bay Heights Cir

City Geneva State NY Zip Code 14456-9766

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

Name of Employer March of Dimes Occupation Public Health Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 25 / 2014**

**Transaction ID : VN8MQCNRJ17**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**S. David David Fineman Esq.**

Mailing Address 335 Woodley Rd  
1735 Market St.

City Merion Station State PA Zip Code 19066-1430

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

Name of Employer Fineman Krekstein & Harris Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 22 / 2014**

**Transaction ID : VN8MQCNM862**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Lance Funston**

Mailing Address 2250 Hickory Rd  
Ste 150

City Plymouth Meeting State PA Zip Code 19462-2228

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

Name of Employer Ultimark Products Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8MQCPTGH5**

Amount of Each Receipt this Period  
**2600.00**

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

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

**3850.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 12 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Judith R. Garfinkel**

Mailing Address 200 S Broad St  
FI 3

City Philadelphia State PA Zip Code 19102-3815

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 14 / 2014

**Transaction ID : VN8MQCN3QG9**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Lynne Z. Gold-Bikin Esq.**

Mailing Address 307 Hughes Rd

City King Of Prussia State PA Zip Code 19406-3713

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

Name of Employer Webber Gallager Simson Stapleton Fires Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 14 / 2014

**Transaction ID : VN8MQCN3QM0**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Toni Goodale**

Mailing Address 45 E 80th St

City New York State NY Zip Code 10075-0233

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

Name of Employer Goodale Associates Occupation Chairman & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 24 / 2014

**Transaction ID : VN8MQCNN1G4**

Amount of Each Receipt this Period  
1000.00

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

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

4600.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**William Granzig**

Mailing Address 120 W Lake Sue Ave

City Winter Park State FL Zip Code 32789-5721

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

Name of Employer American Academy of Clinical Sexologis Occupation President/Professor

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8MQCP1CT1**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jennifer Handler**

Mailing Address 3735 Albidale Dr

City Huntingdon Valley State PA Zip Code 19006-2815

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : VN8MQCN3QE3**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Edward Hillis**

Mailing Address 346 E Walnut Ln  
346 East Walnut Lane

City Philadelphia State PA Zip Code 19144-1034

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

Name of Employer Domus, Inc. Occupation President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : VN8MQCP5CR7**

Amount of Each Receipt this Period  
 1300.00

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

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

2800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 14 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Ken Iscol**

Mailing Address 63 Lyndel Rd

City Pound Ridge State NY Zip Code 10576-1204

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : VN8MQCP5BS2**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Lesley Israel**

Mailing Address PO Box 69  
6433 Cedar Cove Road

City Royal Oak State MD Zip Code 21662-0069

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : VN8MQCNHWR4**

Amount of Each Receipt this Period  
 1600.00

**C.** Full Name (Last, First, Middle Initial)  
**Lesley Israel**

Mailing Address PO Box 69  
6433 Cedar Cove Road

City Royal Oak State MD Zip Code 21662-0069

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : VN8MQCNM9T1**

Amount of Each Receipt this Period  
 400.00

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

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

4600.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 15 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth M. Jarin**

Mailing Address 1 Greenbriar Cir

City State Zip Code  
Newtown PA 18940-2619

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

Name of Employer Occupation  
Ballard Sphar LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 02 / 2014

**Transaction ID : VN8MQCHG464**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Kenneth M. Jarin**

Mailing Address 1 Greenbriar Cir

City State Zip Code  
Newtown PA 18940-2619

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

Name of Employer Occupation  
Ballard Sphar LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 02 / 2014

**Transaction ID : VN8MQCMTCS4**

Amount of Each Receipt this Period  
2400.00

**C.** Full Name (Last, First, Middle Initial)  
**Martha Kanter**

Mailing Address 1842 Ontario PI NW  
Apt 416

City State Zip Code  
Washington DC 20009

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

Name of Employer Occupation  
New York University Visiting Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 21 / 2014

**Transaction ID : VN8MQCNEP24**

Amount of Each Receipt this Period  
250.00

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

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

5250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 16 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Steven Kaufmann**

Mailing Address 2930 Upton St NW

City Washington State DC Zip Code 20008-1151

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

Name of Employer Morrison & Foerster LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8MQCP2KP3**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jonathan Keidan**

Mailing Address 7 Great Jones St Apt 2

City New York State NY Zip Code 10012-1100

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

Name of Employer Escapist Media Occupation Digital Media Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 24 / 2014

**Transaction ID : VN8MQCNN5H9**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**David Kessler**

Mailing Address 280 King Of Prussia Rd

City Radnor State PA Zip Code 19087-5110

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

Name of Employer Kessler Topaz Meltzer & Cheek LLP Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4327.77

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : VN8MQCN3QK2**

Amount of Each Receipt this Period  
1250.00

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

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

2250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 OF 57  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Adrienne B Koch**

Mailing Address 57 Bond St  
Apt 2E

City State Zip Code  
New York NY 10012-2484

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

Name of Employer Occupation  
Katsky Korins LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8MQCNYP37**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Christina Lurie**

Mailing Address 139 Cheswold Ln

City State Zip Code  
Haverford PA 19041

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

Name of Employer Occupation  
Philadelphia Eagles Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : VN8MQCNM888**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Patrick Lynch**

Mailing Address 1 Park Row  
Ste 5

City State Zip Code  
Providence RI 02903-1235

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

Name of Employer Occupation  
Patrick Lynch Group Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : VN8MQCN3QP6**

Amount of Each Receipt this Period  
1500.00

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

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

2250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 18 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Ellen Malcolm**

Mailing Address 5060 Linnean Ave NW

City Washington State DC Zip Code 20008-2041

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

Name of Employer Self-Employed Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 11 / 2014**

**Transaction ID : VN8MQCMSBS5**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Manko Gold Katcher & Fox LLP**

Mailing Address 401 E City Ave Ste 500

City Bala Cynwyd State PA Zip Code 19004-1124

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 10 / 2014**

**Transaction ID : VN8MQCN3N40**

Amount of Each Receipt this Period  
**1000.00**

PARTNERSHIP--partners below if itemized

**C.** Full Name (Last, First, Middle Initial)  
**Robert D Fox Esquire**

Mailing Address 221 Derwen Rd

City Merion Station State PA Zip Code 19066-1228

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

Name of Employer Manko, Gold et al Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 10 / 2014**

**Transaction ID : VN8MQCN3RZ8**

Amount of Each Receipt this Period  
**1000.00**

**[MEMO ITEM]**  
\*

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

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

**1250.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 19 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Wendi Shohen Meltzer**

Mailing Address 1190 Fairland Dr

City State Zip Code  
Lower Gwynedd PA 19002-1324

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

Name of Employer Occupation  
Kessler Topaz Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 14 / 2014

**Transaction ID : VN8MQCN3QJ4**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ruth Messinger**

Mailing Address 91 Central Park W  
Apt 7A

City State Zip Code  
New York NY 10023-4609

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

Name of Employer Occupation  
American Jewish World Service Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 22 / 2014

**Transaction ID : VN8MQCNH1E9**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Tobias Millrood**

Mailing Address 1616 Winston Rd  
Ste. 1250

City State Zip Code  
Gladwyne PA 19035-1252

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

Name of Employer Occupation  
Pogust Braslow & Millrood Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 10 / 2014

**Transaction ID : VN8MQCMJZNO**

Amount of Each Receipt this Period  
2500.00

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

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

4000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 20 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Ann Moore**

Mailing Address 170 Columbia Hts

City State Zip Code  
Brooklyn NY 11201-2100

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : VN8MQCNV5M2**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Dan Neiditch**

Mailing Address 635 W 42nd St

City State Zip Code  
New York NY 10036-1920

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

Name of Employer Occupation  
River 2 River Realty Real Estate Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 08 / 2014

**Transaction ID : VN8MQCKXQY0**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Dan Neiditch**

Mailing Address 635 W 42nd St

City State Zip Code  
New York NY 10036-1920

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

Name of Employer Occupation  
River 2 River Realty Real Estate Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 08 / 2014

**Transaction ID : VN8MQCMTAV7**

Amount of Each Receipt this Period  
 2400.00

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

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

6000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 21 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Taylor Neidtitch**

Mailing Address 14 Alex Dr

City State Zip Code  
White Plains NY 10605-3400

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2014

**Transaction ID : VN8MQCN8MK7**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Bernard W. Nussbaum**

Mailing Address 51 W 52nd St  
FI 29

City State Zip Code  
New York NY 10019-6116

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

Name of Employer Occupation  
Wachtell, Lipton, Rose & Katz Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 23 / 2014

**Transaction ID : VN8MQCNNYE8**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jane O'Connor**

Mailing Address 2807 35th St NW

City State Zip Code  
Washington DC 20007-1412

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

Name of Employer Occupation  
Humana Political Action Committee Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 25 / 2014

**Transaction ID : VN8MQCNRV99**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 22 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Todd J O'Malley**

Mailing Address 201 Franklin Ave  
Ste 1

City State Zip Code  
Scranton PA 18503-1947

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

Name of Employer Occupation  
O'Malley & Langan Law Offices Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 14 / 2014

**Transaction ID : VN8MQCN3QQ4**

Amount of Each Receipt this Period  
1600.00

**B.** Full Name (Last, First, Middle Initial)  
**Todd J O'Malley**

Mailing Address 201 Franklin Ave  
Ste 1

City State Zip Code  
Scranton PA 18503-1947

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

Name of Employer Occupation  
O'Malley & Langan Law Offices Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 14 / 2014

**Transaction ID : VN8MQCN3QX1**

Amount of Each Receipt this Period  
1400.00

**C.** Full Name (Last, First, Middle Initial)  
**Christopher Patusky**

Mailing Address PO Box 673

City State Zip Code  
Upperville VA 20185-0673

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

Name of Employer Occupation  
Patusky Associates Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 29 / 2014

**Transaction ID : VN8MQCP25E9**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 23 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Celestino R. Pennoni**

Mailing Address 411 Valley Glen Dr

City State Zip Code  
Bryn Mawr PA 19010-2054

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

Name of Employer Occupation  
Pennoni Associates Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 04 / 2014

**Transaction ID : VN8MQCM6R31**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Earl Pomeroy**

Mailing Address 950 F Street NW

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation  
Alston & Bird Senior Counsel

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014

**Transaction ID : VN8MQCPTGK1**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Edward Rendell**

Mailing Address 3006 Midvale Ave

City State Zip Code  
Philadelphia PA 19129-1028

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

Name of Employer Occupation  
Ballard Spahr LLP Special Counsel

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014

**Transaction ID : VN8MQCPTGJ3**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 24 OF 57  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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

**A.** Full Name (Last, First, Middle Initial)  
**William Rinaldi**

Mailing Address **PO Box 3972**

City **Scranton** State **PA** Zip Code **18505-0972**

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

Name of Employer **Self Employed** Occupation **Attorney**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 22 / 2014**

**Transaction ID : VN8MQCNM8B1**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Israel Roizman**

Mailing Address **832 Germantown Pike Ste 5**

City **Plymouth Meeting** State **PA** Zip Code **19462-2442**

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

Name of Employer **Roizman Development** Occupation **President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 23 / 2014**

**Transaction ID : VN8MQCNM6J1**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ronald Rubin**

Mailing Address **243 Conshohocken State Rd**

City **Penn Valley** State **PA** Zip Code **19072-1340**

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

Name of Employer **PA Real Estate Investment Trust** Occupation **Executive Chairman**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 02 / 2014**

**Transaction ID : VN8MQCHG8H7**

Amount of Each Receipt this Period  
 1000.00

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

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

6100.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 25 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Lee Rudy**

Mailing Address 280 King Of Prussia Rd

City Radnor State PA Zip Code 19087-5110

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

Name of Employer Kessler Topaz Meltzer & Check, LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1077.77**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 14 / 2014**

**Transaction ID : VN8MQCN3QR2**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Schiffrin**

Mailing Address 127 Knightsbridge Rd

City Wynnewood State PA Zip Code 19096-1212

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 08 / 2014**

**Transaction ID : VN8MQCKSDB6**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Phil Selden**

Mailing Address PO Box 703

City Glen Echo State MD Zip Code 20812-0703

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

Name of Employer United States Attorney's Office Occupation Asst. US Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 28 / 2014**

**Transaction ID : VN8MQCNWTM3**

Amount of Each Receipt this Period  
**500.00**

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

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

**2000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 26 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Shirley Shils**

Mailing Address 335 S Woodbine Ave

City State Zip Code  
Penn Valley PA 19072-1525

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : VN8MQCNVQX2**

Amount of Each Receipt this Period  
1600.00

**B.** Full Name (Last, First, Middle Initial)  
**Shirley Shils**

Mailing Address 335 S Woodbine Ave

City State Zip Code  
Penn Valley PA 19072-1525

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : VN8MQCP7312**

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim Slattery**

Mailing Address 1600 Maddux Ln

City State Zip Code  
McLean VA 22101-3200

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

Name of Employer Occupation  
Wiley, Rein & Fielding Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : VN8MQCPRRS1**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 27 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Richard Stern**

Mailing Address 660 Hidden Pond Ln

City State Zip Code  
Huntingdon Valley PA 19006-7724

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

Name of Employer Occupation  
Stern & Eisenberg PC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 12 / 2014

**Transaction ID : VN8MQCMT7W8**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Deborah Tannen**

Mailing Address 700 Live Oak Dr

City State Zip Code  
Mc Lean VA 22101-1569

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

Name of Employer Occupation  
Georgetown University Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014

**Transaction ID : VN8MQCP5TV1**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Susan Thomases**

Mailing Address 929 Park Ave  
Apt 7B

City State Zip Code  
New York NY 10028-0211

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 24 / 2014

**Transaction ID : VN8MQCNND11**

Amount of Each Receipt this Period  
500.00

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

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

1100.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 28 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Tobias**

Mailing Address 146 Central Park W  
4EE

City State Zip Code  
New York NY 10023-6297

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

Name of Employer Occupation  
Self-Employed Writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 24 / 2014

**Transaction ID : VN8MQCNPXH8**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Marc Topaz**

Mailing Address 280 King Of Prussia Rd

City State Zip Code  
Radnor PA 19087-5110

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

Name of Employer Occupation  
Kessler Topaz Meltzer & Check, LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4327.77

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : VN8MQCN3QS0**

Amount of Each Receipt this Period  
288.85

**C.** Full Name (Last, First, Middle Initial)  
**Marc Topaz**

Mailing Address 280 King Of Prussia Rd

City State Zip Code  
Radnor PA 19087-5110

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

Name of Employer Occupation  
Kessler Topaz Meltzer & Check, LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4327.77

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : VN8MQCN3QY9**

Amount of Each Receipt this Period  
961.15

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

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

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 29 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Joan Segal Trachtenberg**

Mailing Address 330 McClenaghan Mill Rd

City Wynnewood State PA Zip Code 19096-1120

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

Name of Employer Bryn Mawr Hospital Occupation Registered Nurse

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : VN8MQCN3QV5**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Joseph Trippi**

Mailing Address 8873 Tilghman Island Rd

City Wittman State MD Zip Code 21676-1330

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

Name of Employer Trippi & associates Occupation Media Agency

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8MQCNynt6**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**James Walker**

Mailing Address 120 W Lake Sue Ave

City Winter Park State FL Zip Code 32789-5721

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

Name of Employer American Academy of Clinical Sexologis Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8MQCP1C39**

Amount of Each Receipt this Period  
1000.00

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

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

2750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 30 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Whitney Williams**

Mailing Address 1521 2nd Ave  
Ste 400

City State Zip Code  
Seattle WA 98101-4500

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

Name of Employer Occupation  
Self-Employed Williams Works

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 01 / 2014

**Transaction ID : VN8MQCH8NP4**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**JONATHAN YAROWSKY**

Mailing Address 4200 Massachusetts Ave NW  
Apt 908

City State Zip Code  
Washington DC 20016-4735

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

Name of Employer Occupation  
PATTON BOGGS Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 28 / 2014

**Transaction ID : VN8MQCPB1F9**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Andrew Zivitz**

Mailing Address 602 Lorine Ln

City State Zip Code  
Plymouth Meeting PA 19462-1260

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

Name of Employer Occupation  
Topaz, Kessler, LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 14 / 2014

**Transaction ID : VN8MQCN3QT8**

Amount of Each Receipt this Period  
500.00

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

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

3600.00

87567.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 31 OF 57 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A. Duane Morris Government Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 505 9th St NW  
Ste 1000  
City Washington State DC Zip Code 20004-2166

FEC ID number of contributing federal political committee. **C** C00364133

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 14 / 2014

**Transaction ID : VN8MQCN3NJ9**

Amount of Each Receipt this Period  
2500.00

**B. Friends of Josh Shapiro**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 162  
City Abington State PA Zip Code 19001-0162

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 10 / 2014

**Transaction ID : VN8MQCN3N24**

Amount of Each Receipt this Period  
1000.00

Comprised of Permissible Funds

**C. Friends of Marian B. Tasco**

Full Name (Last, First, Middle Initial)  
Mailing Address 1000 E Vernon Rd  
City Philadelphia State PA Zip Code 19150-3124

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014

**Transaction ID : VN8MQCPRRY1**

Amount of Each Receipt this Period  
500.00

Comprised of Permissible Funds

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

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

4000.00

4000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |               |  |  |
|---|---|---------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 32 OF 57 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Amtrak</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 03 / 2014                              |
| Mailing Address 30th and Market Streets  |  | Amount of Each Disbursement this Period<br>7,000.00<br><b>Transaction ID : VN7NF9S42A9</b> |
| City Philadelphia  | State PA Zip Code 19104  |  |
| Purpose of Disbursement<br>Travel  | Category/Type  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Amtrak</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 07 / 2014                           |
| Mailing Address 30th and Market Streets  |  | Amount of Each Disbursement this Period<br>23.80<br><b>Transaction ID : VN7NF9S42B6</b> |
| City Philadelphia  | State PA Zip Code 19104  |   |
| Purpose of Disbursement<br>Travel  | Category/Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Linda August</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                             |
| Mailing Address 2401 Pennsylvania Ave<br>6B23  |  | Amount of Each Disbursement this Period<br>7000.00<br><b>Transaction ID : VN7NF9S43H7</b> |
| City Philadelphia  | State PA Zip Code 19130-3002   |   |
| Purpose of Disbursement<br>Consultant - Fundraising  | Category/Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 7132.60 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 33 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Best Buy</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 24 / 2014 |
| Mailing Address 642 Baltimore Pike  |  | Amount of Each Disbursement this Period<br>207.37             |
| City<br>Springfield   | State<br>PA  |   |
| Zip Code<br>19064-3030  | Purpose of Disbursement<br>Office Supplies   | Transaction ID : VN7NF9S9JS1                                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Black Blue Media, Inc.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address PO Box 192  |  | Amount of Each Disbursement this Period<br>13750.00           |
| City<br>Gladwyne  | State<br>PA  |   |
| Zip Code<br>19035-0192  | Purpose of Disbursement<br>Media Account   | Transaction ID : VN7NF9S42N5                                  |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Clearwire</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 22 / 2014 |
| Mailing Address 7101 Democracy Blvd.  |  | Amount of Each Disbursement this Period<br>109.98             |
| City<br>Bethesda  | State<br>MD  |   |
| Zip Code<br>20817   | Purpose of Disbursement<br>Utilities   | Transaction ID : VN7NF9S9JT9                                  |
| Candidate Name  | Category/<br>Type<br>001   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 14067.35 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 34 OF 57 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. CVS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 18 / 2014 |
| Mailing Address 1826 Chestnut St  |  | Amount of Each Disbursement this Period<br>6802.13            |
| City Philadelphia   | State PA Zip Code 19103-4902   |   |
| Purpose of Disbursement<br>Office Supplies  | Category/Type  | Transaction ID : VN7NF9S42P3                                  |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Executive Fliteways, Inc.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 10 / 2014 |
| Mailing Address 1 Clark Dr  |  | Amount of Each Disbursement this Period<br>6610.50            |
| City Ronkonkoma   | State NY Zip Code 11779-7354   |   |
| Purpose of Disbursement<br>Travel   | Category/Type  | Transaction ID : VN7NF9S42S7                                  |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Exxon Mobil</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 21 / 2014 |
| Mailing Address 4200 Whitaker Ave   |  | Amount of Each Disbursement this Period<br>79.14              |
| City Philadelphia   | State PA Zip Code 19124-6013   |   |
| Purpose of Disbursement<br>Travel   | Category/Type<br>002   | Transaction ID : VN7NF9S9JX2                                  |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 6802.13 |
| <b>TOTAL</b> 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:<br>(check only one)          |                                    | PAGE 35 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

**A. Fastsigns**

Full Name (Last, First, Middle Initial)  
Mailing Address 1600 John F Kennedy Blvd

City Philadelphia State PA Zip Code 19103-2804

Purpose of Disbursement Printing of Campaign Materials

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 10 / 2014

Amount of Each Disbursement this Period: 1976.88

Transaction ID : VN7NF9S42T5

**B. FedEx**

Full Name (Last, First, Middle Initial)  
Mailing Address 3875 Airways Blvd  
Module H3

City Memphis State TN Zip Code 38116-5070

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 02 / 2014

Amount of Each Disbursement this Period: 26.24

Transaction ID : VN7NF9S42V3

**C. FedEx**

Full Name (Last, First, Middle Initial)  
Mailing Address 3875 Airways Blvd  
Module H3

City Memphis State TN Zip Code 38116-5070

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 07 / 2014

Amount of Each Disbursement this Period: 53.35

Transaction ID : VN7NF9S42W1

**SUBTOTAL** of Disbursements This Page (optional) ..... 2056.47

**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 36 OF 57                |                              |
|   | <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
|   | <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)  |  | Date of Disbursement                             |
| <b>A. FedEx</b>  |  | M M / D D / Y Y Y Y<br>04 / 09 / 2014            |
| Mailing Address 3875 Airways Blvd<br>Module H3   |  | Amount of Each Disbursement this Period<br>32.00 |
| City Memphis   | State TN Zip Code 38116-5070   |  |
| Purpose of Disbursement Shipping   | Category/Type  | Transaction ID : VN7NF9S42X9                     |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)  |  | Date of Disbursement                             |
| <b>B. FedEx</b>  |  | M M / D D / Y Y Y Y<br>04 / 10 / 2014            |
| Mailing Address 3875 Airways Blvd<br>Module H3   |  | Amount of Each Disbursement this Period<br>18.94 |
| City Memphis   | State TN Zip Code 38116-5070   |  |
| Purpose of Disbursement Shipping   | Category/Type  | Transaction ID : VN7NF9S42Y7                     |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)  |  | Date of Disbursement                             |
| <b>C. FedEx</b>  |  | M M / D D / Y Y Y Y<br>04 / 24 / 2014            |
| Mailing Address 3875 Airways Blvd<br>Module H3   |  | Amount of Each Disbursement this Period<br>26.24 |
| City Memphis   | State TN Zip Code 38116-5070   |  |
| Purpose of Disbursement Shipping   | Category/Type<br>001   | Transaction ID : VN7NF9S9JY0                     |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 77.18 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 37 OF 57 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)  |  | Date of Disbursement                    |
| <b>A. First Data Merchant Services</b>   |  | M M / D D / Y Y Y Y<br>04 / 03 / 2014   |
| Mailing Address 5565 Glenridge Connector NE<br>Ste 2000  |  | Amount of Each Disbursement this Period |
| City Atlanta   | State GA   | Zip Code 30342-4799                     |
| Purpose of Disbursement<br>Credit Card Processing Fee  | Category/Type<br>003   |   |
| Candidate Name   | Transaction ID : VN7NF9S42Z4   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)  |  | Date of Disbursement                    |
| <b>B. First Data Merchant Services</b>   |  | M M / D D / Y Y Y Y<br>04 / 03 / 2014   |
| Mailing Address 5565 Glenridge Connector NE<br>Ste 2000  |  | Amount of Each Disbursement this Period |
| City Atlanta   | State GA   | Zip Code 30342-4799                     |
| Purpose of Disbursement<br>Credit Card Processing Fee  | Category/Type<br>003   |   |
| Candidate Name   | Transaction ID : VN7NF9S4302   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)  |  | Date of Disbursement                    |
| <b>C. First Data Merchant Services</b>   |  | M M / D D / Y Y Y Y<br>04 / 03 / 2014   |
| Mailing Address 5565 Glenridge Connector NE<br>Ste 2000  |  | Amount of Each Disbursement this Period |
| City Atlanta   | State GA   | Zip Code 30342-4799                     |
| Purpose of Disbursement<br>Credit Card Processing Fee  | Category/Type<br>003   |   |
| Candidate Name   | Transaction ID : VN7NF9S4310   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1933.75 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 38 OF 57 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Front Stoop Strategies, LLC</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                             |
| Mailing Address PO Box 444   |   | Amount of Each Disbursement this Period<br>1500.00<br><b>Transaction ID : VN7NF9S4336</b> |
| City<br>Conshohocken   | State<br>PA   |   |
| Zip Code<br>19428-0444   | Purpose of Disbursement<br>Consultant - Strategy  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Independence Strategy, LLC</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 10 / 2014                            |
| Mailing Address PO Box 789   |   | Amount of Each Disbursement this Period<br>642.00<br><b>Transaction ID : VN7NF9S43B9</b> |
| City<br>Wayne  | State<br>PA   |  |
| Zip Code<br>19087-0789   | Purpose of Disbursement<br>Printing of Campaign Materials   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Independence Strategy, LLC</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 28 / 2014                             |
| Mailing Address PO Box 789   |   | Amount of Each Disbursement this Period<br>2712.00<br><b>Transaction ID : VN7NF9S9JZ8</b> |
| City<br>Wayne  | State<br>PA   |   |
| Zip Code<br>19087-0789   | Purpose of Disbursement<br>Printing of Campaign Materials   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4854.00 |
| <b>TOTAL</b> 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:<br>(check only one)          |                                    | PAGE 39 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. International House of Philadelphia, Inc.</b>                            |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 01 / 2014</b>                            |
| Mailing Address <b>3701 Chestnut St</b>   |   | Amount of Each Disbursement this Period<br><b>800.00</b><br>Transaction ID : <b>VN7NF9S43C7</b> |
| City <b>Philadelphia</b> State <b>PA</b> Zip Code <b>19104-3104</b>   | Purpose of Disbursement<br><b>Office Rent</b>   |   |
| Candidate Name  | Category/Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Jack's Delicatessen</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 28 / 2014</b>                            |
| Mailing Address <b>8500 Bustleton Ave</b>   |   | Amount of Each Disbursement this Period<br><b>385.00</b><br>Transaction ID : <b>VN7NF9S9K06</b> |
| City <b>Philadelphia</b> State <b>PA</b> Zip Code <b>19152-1204</b>   | Purpose of Disbursement<br><b>Meals</b>   |   |
| Candidate Name  | Category/Type   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |   |   |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Joe Slade White &amp; Company</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 03 / 2014</b>                             |
| Mailing Address <b>5999 S Park Ave Ste 101</b>  |   | Amount of Each Disbursement this Period<br><b>6900.00</b><br>Transaction ID : <b>VN7NF9S9EW7</b> |
| City <b>Hamburg</b> State <b>NY</b> Zip Code <b>14075-3719</b>  | Purpose of Disbursement<br><b>Consultant - Media</b>  |  |
| Candidate Name  | Category/Type   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>8085.00</b> |
| <b>TOTAL</b> 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 40 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Joe Slade White &amp; Company</b>                               |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 14 / 2014</b>                             |
| Mailing Address 5999 S Park Ave<br>Ste 101   |  | Amount of Each Disbursement this Period<br><b>9063.84</b><br><b>Transaction ID : VN7NF9S9EX5</b> |
| City Hamburg State NY Zip Code 14075-3719  | Purpose of Disbursement<br>Consultant - Media  |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Joe Slade White &amp; Company</b>                               |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 25 / 2014</b>                             |
| Mailing Address 5999 S Park Ave<br>Ste 101   |  | Amount of Each Disbursement this Period<br><b>9063.84</b><br><b>Transaction ID : VN7NF9S9EY3</b> |
| City Hamburg State NY Zip Code 14075-3719  | Purpose of Disbursement<br>Consultant - Media  |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Joe Trippi &amp; Associates Inc.</b>                            |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 01 / 2014</b>                             |
| Mailing Address 606A N Talbot St<br>Ste 303  |  | Amount of Each Disbursement this Period<br><b>3500.00</b><br><b>Transaction ID : VN7NF9S43G9</b> |
| City Saint Michaels State MD Zip Code 21663-2110   | Purpose of Disbursement<br>Consultant - Website  |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|   |                 |
|---|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>21627.68</b> |
| <b>TOTAL</b> 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 41 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Jones &amp; Associates</b>                                      |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 01 / 2014</b> |
| Mailing Address <b>30 Twig Ln</b>  |  | Amount of Each Disbursement this Period<br><b>8700.00</b>            |
| City <b>Willingboro</b> State <b>NJ</b> Zip Code <b>08046-3835</b>   | Purpose of Disbursement<br><b>Voter Contact</b>  |  |
| Candidate Name   | Category/Type  | <b>Transaction ID : VN7NF9S43J5</b>                                  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. NGP VAN, Inc</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 29 / 2014</b> |
| Mailing Address <b>1101 15th St NW Ste 500</b>   |  | Amount of Each Disbursement this Period<br><b>1600.00</b>            |
| City <b>Washington</b> State <b>DC</b> Zip Code <b>20005-5006</b>  | Purpose of Disbursement<br><b>Software</b>   |  |
| Candidate Name   | Category/Type  | <b>Transaction ID : VN7NF9S9K22</b>                                  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. NYC - Taxi</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 04 / 2014</b> |
| Mailing Address <b>33 Beaver St</b>  |  | Amount of Each Disbursement this Period<br><b>17.00</b>              |
| City <b>New York</b> State <b>NY</b> Zip Code <b>10004-2736</b>  | Purpose of Disbursement<br><b>Travel</b>   |  |
| Candidate Name   | Category/Type<br><b>002</b>  | <b>Transaction ID : VN7NF9S43N8</b>                                  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|   |                 |
|---|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>10317.00</b> |
| <b>TOTAL</b> 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 42 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. NYC - Taxi</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 04 / 2014</b> |
| Mailing Address <b>33 Beaver St</b>  |  | Amount of Each Disbursement this Period<br><b>13.75</b>              |
| City <b>New York</b> State <b>NY</b> Zip Code <b>10004-2736</b>  | Purpose of Disbursement <b>Travel</b> Category/Type <b>002</b>   |  |
| Candidate Name   |  | <b>Transaction ID : VN7NF9S43P6</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)<br><b>B. NYC - Taxi</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 07 / 2014</b> |
| Mailing Address <b>33 Beaver St</b>  |  | Amount of Each Disbursement this Period<br><b>13.00</b>              |
| City <b>New York</b> State <b>NY</b> Zip Code <b>10004-2736</b>  | Purpose of Disbursement <b>Travel</b> Category/Type <b>002</b>   |  |
| Candidate Name   |  | <b>Transaction ID : VN7NF9S43Q4</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)<br><b>c. NYC - Taxi</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 07 / 2014</b> |
| Mailing Address <b>33 Beaver St</b>  |  | Amount of Each Disbursement this Period<br><b>15.45</b>              |
| City <b>New York</b> State <b>NY</b> Zip Code <b>10004-2736</b>  | Purpose of Disbursement <b>Travel</b> Category/Type <b>002</b>   |  |
| Candidate Name   |  | <b>Transaction ID : VN7NF9S43R0</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>42.20</b> |
| <b>TOTAL</b> 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 43 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Office Depot</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 17 / 2014</b> |
| Mailing Address <b>2400 Chemical Rd</b>   |   | Amount of Each Disbursement this Period<br><b>30.97</b>              |
| City<br><b>Plymouth Meeting</b>   | State<br><b>PA</b>  |  |
| Zip Code<br><b>19462-1727</b>   | Purpose of Disbursement<br><b>Office Supplies</b>   | <b>Transaction ID : VN7NF9S43T6</b>                                  |
| Candidate Name  | Category/Type   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Office Depot</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 28 / 2014</b> |
| Mailing Address <b>2400 Chemical Rd</b>   |   | Amount of Each Disbursement this Period<br><b>11.44</b>              |
| City<br><b>Plymouth Meeting</b>   | State<br><b>PA</b>  |  |
| Zip Code<br><b>19462-1727</b>   | Purpose of Disbursement<br><b>Office Supplies</b>   | <b>Transaction ID : VN7NF9S9K48</b>                                  |
| Candidate Name  | Category/Type<br><b>001</b>   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Office Depot</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 28 / 2014</b> |
| Mailing Address <b>2400 Chemical Rd</b>   |   | Amount of Each Disbursement this Period<br><b>34.95</b>              |
| City<br><b>Plymouth Meeting</b>   | State<br><b>PA</b>  |  |
| Zip Code<br><b>19462-1727</b>   | Purpose of Disbursement<br><b>Office Supplies</b>   | <b>Transaction ID : VN7NF9S9K56</b>                                  |
| Candidate Name  | Category/Type<br><b>001</b>   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>77.36</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |              |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 44 OF 57                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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

|  |                              |   |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>   |                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 02 / 2014 |
| Mailing Address 911 Panorama Trl S   |                              | Amount of Each Disbursement this Period<br>1853.95            |
| City Rochester   | State NY Zip Code 14625-2311 |   |
| Purpose of Disbursement<br>Payroll - Taxes   | Candidate Name               | Transaction ID : VN7NF9S4403                                  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                              |   |
| State: District:   | Category/Type                |   |

|  |                              |   |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>   |                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 02 / 2014 |
| Mailing Address 911 Panorama Trl S   |                              | Amount of Each Disbursement this Period<br>3996.42            |
| City Rochester   | State NY Zip Code 14625-2311 |   |
| Purpose of Disbursement<br>Payroll   | Candidate Name               | Transaction ID : VN7NF9S4411                                  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                              |   |
| State: District:   | Category/Type                |   |

|  |                              |   |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Ronald Kolla</b>  |                              | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 02 / 2014 |
| Mailing Address 2 Barley Way   |                              | Amount of Each Disbursement this Period<br>1071.12            |
| City Horsham   | State PA Zip Code 19044-1854 |   |
| Purpose of Disbursement<br>Payroll   | Candidate Name               | Transaction ID : VN7NF9S44V6                                  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                              |   |
| State: District:   | Category/Type<br>001         | [MEMO ITEM]<br>*  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 5850.37 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 45 OF 57 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Dylan McGarry</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 02 / 2014 |
| Mailing Address 3430 Sansom St<br>Apt 3F   |  | Amount of Each Disbursement this Period<br>1484.11            |
| City Philadelphia  | State PA   |   |
| Zip Code 19104-3404  | Purpose of Disbursement Payroll  | Transaction ID : VN7NF9S4522                                  |
| Candidate Name   | Category/Type 001  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]<br>*  |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Katherine E Vinci</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 02 / 2014 |
| Mailing Address 6475 Marlboro Ct   |  | Amount of Each Disbursement this Period<br>1441.19            |
| City Huntingtown   | State MD   |   |
| Zip Code 20639-9075  | Purpose of Disbursement Payroll  | Transaction ID : VN7NF9S4548                                  |
| Candidate Name   | Category/Type 001  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]<br>*  |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Paychex</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 03 / 2014 |
| Mailing Address 911 Panorama Trl S   |  | Amount of Each Disbursement this Period<br>55.70              |
| City Rochester   | State NY   |   |
| Zip Code 14625-2311  | Purpose of Disbursement Payroll - Invoice  | Transaction ID : VN7NF9S43X9                                  |
| Candidate Name   | Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 55.70 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 46 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 15 / 2014 |
| Mailing Address 911 Panorama Trl S   |  | Amount of Each Disbursement this Period<br>3861.30            |
| City Rochester   | State NY   |   |
| Zip Code 14625-2311  | Purpose of Disbursement Payroll  | Transaction ID : VN7NF9S4429                                  |
| 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)<br><b>B. Ronald Kolla</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 15 / 2014 |
| Mailing Address 2 Barley Way   |  | Amount of Each Disbursement this Period<br>1001.52            |
| City Horsham   | State PA   |   |
| Zip Code 19044-1854  | Purpose of Disbursement Payroll  | Transaction ID : VN7NF9S44W4                                  |
| 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) | [MEMO ITEM]   |
| State: District:   |  | *   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Dylan McGarry</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 15 / 2014 |
| Mailing Address 3430 Sansom St<br>Apt 3F   |  | Amount of Each Disbursement this Period<br>1484.11            |
| City Philadelphia  | State PA   |   |
| Zip Code 19104-3404  | Purpose of Disbursement Payroll  | Transaction ID : VN7NF9S44Z8                                  |
| 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) | [MEMO ITEM]   |
| State: District:   |  | *   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3861.30 |
| <b>TOTAL</b> 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:<br>(check only one)          |                                    | PAGE 47 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Katherine E Vinci</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 15 / 2014</b> |
| Mailing Address <b>6475 Marlboro Ct</b>   |   | Amount of Each Disbursement this Period<br><b>1375.67</b>            |
| City <b>Huntingtown</b>   | State <b>MD</b>   | Zip Code <b>20639-9075</b>   |
| Purpose of Disbursement<br><b>Payroll</b>   | Category/Type<br><b>001</b>   |  |
| Candidate Name  |   | <b>Transaction ID : VN7NF9S4555</b>                                  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>[MEMO ITEM]</b><br>*  |
| State: District:  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Paychex</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 16 / 2014</b> |
| Mailing Address <b>911 Panorama Trl S</b>   |   | Amount of Each Disbursement this Period<br><b>55.70</b>              |
| City <b>Rochester</b>   | State <b>NY</b>   | Zip Code <b>14625-2311</b>   |
| Purpose of Disbursement<br><b>Payroll - Invoice</b>   | Category/Type   |  |
| Candidate Name  |   | <b>Transaction ID : VN7NF9S43Y7</b>                                  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Paychex</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 16 / 2014</b> |
| Mailing Address <b>911 Panorama Trl S</b>   |   | Amount of Each Disbursement this Period<br><b>1989.09</b>            |
| City <b>Rochester</b>   | State <b>NY</b>   | Zip Code <b>14625-2311</b>   |
| Purpose of Disbursement<br><b>Payroll - Taxes</b>   | Category/Type   |  |
| Candidate Name  |   | <b>Transaction ID : VN7NF9S43Z5</b>                                  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>2044.79</b> |
| <b>TOTAL</b> 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 48 OF 57                |                              |
|   | <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
|   | <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Paychex</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 30 / 2014 |
| Mailing Address 911 Panorama Trl S   |  | Amount of Each Disbursement this Period<br>3861.28            |
| City Rochester   | State NY Zip Code 14625-2311   |   |
| Purpose of Disbursement Payroll  | Category/Type 001  | Transaction ID : VN7NF9S7ZM4                                  |
| Candidate Name   |  |   |
| 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)<br><b>B. Ronald Kolla</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 30 / 2014 |
| Mailing Address 2 Barley Way   |  | Amount of Each Disbursement this Period<br>1001.52            |
| City Horsham   | State PA Zip Code 19044-1854   |   |
| Purpose of Disbursement Payroll  | Category/Type 001  | Transaction ID : VN7NF9S7ZQ7                                  |
| Candidate Name   |  |   |
| 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) | [MEMO ITEM]<br>*  |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Dylan McGarry</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 30 / 2014 |
| Mailing Address 3430 Sansom St Apt 3F  |  | Amount of Each Disbursement this Period<br>1484.11            |
| City Philadelphia  | State PA Zip Code 19104-3404   |   |
| Purpose of Disbursement Payroll  | Category/Type 001  | Transaction ID : VN7NF9S7ZS3                                  |
| Candidate Name   |  |   |
| 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) | [MEMO ITEM]<br>*  |
| State: District:   |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3861.28 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 49 OF 57 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Katherine E Vinci</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 30 / 2014</b> |
| Mailing Address <b>6475 Marlboro Ct</b>  |  | Amount of Each Disbursement this Period<br><b>1375.65</b>            |
| City <b>Huntingtown</b> State <b>MD</b> Zip Code <b>20639-9075</b>   | Purpose of Disbursement <b>Payroll</b> Category/Type <b>001</b>  |  |
| Candidate Name   |  | Transaction ID : <b>VN7NF9S7ZV9</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>[MEMO ITEM]</b><br>*  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Philadelphia - Taxi</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 02 / 2014</b> |
| Mailing Address <b>2024 S 12th St</b>  |  | Amount of Each Disbursement this Period<br><b>8.40</b>               |
| City <b>Philadelphia</b> State <b>PA</b> Zip Code <b>19148-5528</b>  | Purpose of Disbursement <b>Travel</b> Category/Type <b>002</b>   |  |
| Candidate Name   |  | Transaction ID : <b>VN7NF9S4486</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)<br><b>c. Philadelphia - Taxi</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 10 / 2014</b> |
| Mailing Address <b>2024 S 12th St</b>  |  | Amount of Each Disbursement this Period<br><b>11.74</b>              |
| City <b>Philadelphia</b> State <b>PA</b> Zip Code <b>19148-5528</b>  | Purpose of Disbursement <b>Travel</b> Category/Type <b>002</b>   |  |
| Candidate Name   |  | Transaction ID : <b>VN7NF9S4494</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>20.14</b> |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 50 OF 57 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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

Full Name (Last, First, Middle Initial)  
**A. Philadelphia - Taxi**

Mailing Address 2024 S 12th St

City Philadelphia State PA Zip Code 19148-5528

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 10 / 2014

Amount of Each Disbursement this Period: 12.33

Transaction ID : VN7NF9S44A2

Category/Type: 002

Full Name (Last, First, Middle Initial)  
**B. Philadelphia - Taxi**

Mailing Address 2024 S 12th St

City Philadelphia State PA Zip Code 19148-5528

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 14 / 2014

Amount of Each Disbursement this Period: 10.84

Transaction ID : VN7NF9S44B0

Category/Type: 002

Full Name (Last, First, Middle Initial)  
**c. Philadelphia - Taxi**

Mailing Address 2024 S 12th St

City Philadelphia State PA Zip Code 19148-5528

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 14 / 2014

Amount of Each Disbursement this Period: 13.53

Transaction ID : VN7NF9S44C8

Category/Type: 002

**SUBTOTAL** of Disbursements This Page (optional) ..... 36.70

**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:<br>(check only one)          | PAGE 51 OF 57                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Philadelphia - Taxi</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 21 / 2014</b> |
| Mailing Address <b>2024 S 12th St</b>   |   | Amount of Each Disbursement this Period<br><b>19.37</b>              |
| City <b>Philadelphia</b>  | State <b>PA</b>   | Zip Code <b>19148-5528</b>   |
| Purpose of Disbursement<br><b>Travel</b>  | Category/Type<br><b>002</b>   |  |
| Candidate Name  |   | <b>Transaction ID : VN7NF9S9KM4</b>                                  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Philadelphia - Taxi</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 21 / 2014</b> |
| Mailing Address <b>2024 S 12th St</b>   |   | Amount of Each Disbursement this Period<br><b>18.80</b>              |
| City <b>Philadelphia</b>  | State <b>PA</b>   | Zip Code <b>19148-5528</b>   |
| Purpose of Disbursement<br><b>Travel</b>  | Category/Type<br><b>002</b>   |  |
| Candidate Name  |   | <b>Transaction ID : VN7NF9S9KN2</b>                                  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Philadelphia - Taxi</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 21 / 2014</b> |
| Mailing Address <b>2024 S 12th St</b>   |   | Amount of Each Disbursement this Period<br><b>8.45</b>               |
| City <b>Philadelphia</b>  | State <b>PA</b>   | Zip Code <b>19148-5528</b>   |
| Purpose of Disbursement<br><b>Travel</b>  | Category/Type<br><b>002</b>   |  |
| Candidate Name  |   | <b>Transaction ID : VN7NF9S9KQ8</b>                                  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>46.62</b> |
| <b>TOTAL</b> 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:<br>(check only one)          |                                    | PAGE 52 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Philadelphia Parking Authority</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 11 / 2014</b>                   |
| Mailing Address 3101 Market St<br>FI 2  |  | Amount of Each Disbursement this Period<br><b>6.00</b><br>Transaction ID : VN7NF9S4445 |
| City Philadelphia State PA Zip Code 19104-2895                                      | Purpose of Disbursement Parking<br>Category/Type <b>002</b>  |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Philadelphia Parking Authority</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 11 / 2014</b>                   |
| Mailing Address 3101 Market St<br>FI 2  |  | Amount of Each Disbursement this Period<br><b>6.00</b><br>Transaction ID : VN7NF9S4453 |
| City Philadelphia State PA Zip Code 19104-2895                                      | Purpose of Disbursement Parking<br>Category/Type <b>002</b>  |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Philadelphia Parking Authority</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 11 / 2014</b>                   |
| Mailing Address 3101 Market St<br>FI 2  |  | Amount of Each Disbursement this Period<br><b>1.50</b><br>Transaction ID : VN7NF9S4461 |
| City Philadelphia State PA Zip Code 19104-2895                                      | Purpose of Disbursement Parking<br>Category/Type <b>002</b>  |  |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>13.50</b> |
| <b>TOTAL</b> 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:<br>(check only one)          |                                    | PAGE 53 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Philadelphia Parking Authority</b>                                       |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 14 / 2014</b> |
| Mailing Address <b>3101 Market St<br/>FI 2</b>  |   | Amount of Each Disbursement this Period<br><b>6.00</b>               |
| City <b>Philadelphia</b>  | State <b>PA</b> Zip Code <b>19104-2895</b>  |  |
| Purpose of Disbursement<br><b>Parking</b>   | Category/Type<br><b>002</b>   | <b>Transaction ID : VN7NF9S4478</b>                                  |
| Candidate Name  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. RE/MAX</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 01 / 2014</b> |
| Mailing Address <b>527 Fayette St</b>   |   | Amount of Each Disbursement this Period<br><b>1900.00</b>            |
| City <b>Conshohocken</b>  | State <b>PA</b> Zip Code <b>19428-1702</b>  |  |
| Purpose of Disbursement<br><b>Office Rent</b>   | Category/Type   | <b>Transaction ID : VN7NF9S44G0</b>                                  |
| Candidate Name  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples Store</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 09 / 2014</b> |
| Mailing Address <b>1500 Chestnut St<br/>Ste 2</b>   |   | Amount of Each Disbursement this Period<br><b>2.12</b>               |
| City <b>Philadelphia</b>  | State <b>PA</b> Zip Code <b>19102-2700</b>  |  |
| Purpose of Disbursement<br><b>Office Supplies</b>   | Category/Type   | <b>Transaction ID : VN7NF9S44H7</b>                                  |
| Candidate Name  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |   |  |

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>1908.12</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |                |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 54 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Staples Store</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 11 / 2014 |
| Mailing Address 1500 Chestnut St<br>Ste 2   |  | Amount of Each Disbursement this Period<br>198.50             |
| City Philadelphia   | State PA Zip Code 19102-2700   |   |
| Purpose of Disbursement<br>Office Supplies  | Category/Type  | Transaction ID : VN7NF9S44J5                                  |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Sunoco</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 03 / 2014 |
| Mailing Address 296 E Baltimore Ave   |  | Amount of Each Disbursement this Period<br>41.62              |
| City Media  | State PA Zip Code 19063-3411   |   |
| Purpose of Disbursement<br>Travel   | Category/Type<br>002   | Transaction ID : VN7NF9S44M1                                  |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Sunoco</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 28 / 2014 |
| Mailing Address 296 E Baltimore Ave   |  | Amount of Each Disbursement this Period<br>85.69              |
| City Media  | State PA Zip Code 19063-3411   |   |
| Purpose of Disbursement<br>Travel   | Category/Type<br>002   | Transaction ID : VN7NF9S9KS4                                  |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 325.81 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 55 OF 57                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)  |  | Date of Disbursement                    |
| <b>A. Target</b>   |  | M M / D D / Y Y Y Y<br>04 / 30 / 2014   |
| Mailing Address 1 Mifflin St<br># 79   |  | Amount of Each Disbursement this Period |
| City Philadelphia State PA Zip Code 19148-2017   |  | 6.35                                    |
| Purpose of Disbursement Office Supplies  |  | Transaction ID : VN7NF9S9KT2            |
| Candidate Name   |  | Category/Type                           |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)  |  | Date of Disbursement                    |
| <b>B. The Home Depot</b>   |  | M M / D D / Y Y Y Y<br>04 / 21 / 2014   |
| Mailing Address 200 Alan Wood Rd   |  | Amount of Each Disbursement this Period |
| City Conshohocken State PA Zip Code 19428-1137   |  | 73.14                                   |
| Purpose of Disbursement Office Supplies  |  | Transaction ID : VN7NF9S9KV9            |
| Candidate Name   |  | Category/Type                           |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)  |  | Date of Disbursement                    |
| <b>c. The Home Depot</b>   |  | M M / D D / Y Y Y Y<br>04 / 22 / 2014   |
| Mailing Address 200 Alan Wood Rd   |  | Amount of Each Disbursement this Period |
| City Conshohocken State PA Zip Code 19428-1137   |  | 16.51                                   |
| Purpose of Disbursement Office Supplies  |  | Transaction ID : VN7NF9S9KW7            |
| Candidate Name   |  | Category/Type                           |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 96.00 |
| <b>TOTAL</b> 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:<br>(check only one)          |                                    | PAGE 56 OF 57                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Todd Trice Photography</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 25 / 2014</b>  |
| Mailing Address <b>351 Eagle Rd</b>   |   | Amount of Each Disbursement this Period<br><b>3000.00</b><br><b>Transaction ID : VN7NF9S9JN1</b>  |
| City <b>Newtown</b> State <b>PA</b> Zip Code <b>18940-1201</b>              | Purpose of Disbursement<br><b>Photography</b> Category/Type   |   |
| Candidate Name  | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State: District:  |   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. US Airways</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 02 / 2014</b>  |
| Mailing Address <b>4000 E Sky Harbor Blvd</b>                   |   | Amount of Each Disbursement this Period<br><b>8.99</b><br><b>Transaction ID : VN7NF9S44P7</b>   |
| City <b>Phoenix</b> State <b>AZ</b> Zip Code <b>85034-3802</b>  | Purpose of Disbursement<br><b>Travel</b> Category/Type<br><b>002</b>  |   |
| Candidate Name  | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State: District:  |   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y  |
| Mailing Address                                      |   | Amount of Each Disbursement this Period  |
| City State Zip Code                                  | Purpose of Disbursement Category/Type   |  |
| Candidate Name                                       | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State: District:                                     |   |  |

|   |                 |
|---|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>3008.99</b>  |
| <b>TOTAL</b> This Period (last page this line number only)..... | <b>98202.04</b> |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |                                      |                                    |                                     |   |
|---|--------------------------------------|------------------------------------|-------------------------------------|---|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one) |                                    | PAGE 57 OF 57                       |   |
|   | <input type="checkbox"/> 17<br>20a   | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input checked="" type="checkbox"/> 19b<br>21 |

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

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Abington Rockledge Democratic Committee</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 28 / 2014</b>   |
| Mailing Address <b>PO Box 132</b>  |  | Amount of Each Disbursement this Period<br><b>500.00</b><br>Transaction ID : <b>VN7NF9S9JQ7</b>  |
| City <b>Abington</b> State <b>PA</b> Zip Code <b>19001-0132</b>                              | Purpose of Disbursement<br><b>Political Contribution</b> <input type="checkbox"/> 011<br>Category/Type |  |
| Candidate Name<br><b>Abington Rockledge Democratic Committee</b>                             |  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) |
| State: _____ District: _____   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Colonial Area Democratic Committee</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 24 / 2014</b>   |
| Mailing Address <b>4025 Kottler Dr</b>  |  | Amount of Each Disbursement this Period<br><b>500.00</b><br>Transaction ID : <b>VN7NF9S9JV7</b>  |
| City <b>Lafayette Hill</b> State <b>PA</b> Zip Code <b>19444-1537</b>                   | Purpose of Disbursement<br><b>Political Contribution</b> <input type="checkbox"/> 011<br>Category/Type |  |
| Candidate Name<br><b>Colonial Area Democratic Committee</b>                             |  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) |
| State: _____ District: _____  |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. PENNSYLVANIA DEMOCRATIC PARTY</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 15 / 2014</b>   |
| Mailing Address <b>300 N 2nd St<br/>Fl 8</b>                                       |  | Amount of Each Disbursement this Period<br><b>1882.84</b><br>Transaction ID : <b>VN7NF9S9EV9</b>   |
| City <b>Harrisburg</b> State <b>PA</b> Zip Code <b>17101-1303</b>                  | Purpose of Disbursement<br><b>Voter File</b> <input type="checkbox"/> 011<br>Category/Type |  |
| Candidate Name<br><b>PENNSYLVANIA DEMOCRATIC PARTY</b>                             |  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) |
| State: _____ District: _____   |  |  |

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>2882.84</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... | <b>2882.84</b> |