

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

LaFerla For Congress

ADDRESS (number and street)

LaFerla for Congress

104 Spring Ave. #832

Check if different than previously reported. (ACC)

Chestertown

MD

21620

2. FEC IDENTIFICATION NUMBER ▼

C C00507335

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MD

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2013

through

M M / D D / Y Y Y Y
09 / 30 / 2013

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 Frances Miller

Signature of Treasurer Frances Miller

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 15 / 2013

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									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
LaFerla For Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	47834.06	90818.34
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	47834.06	90818.34
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	41138.61	60566.06
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	41138.61	60566.06
8. Cash on Hand at Close of Reporting Period (from Line 27).....	34840.58	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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

LaFerla For Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	40964.06	72430.39
(ii) Unitemized.....	6870.00	18387.95
(iii) TOTAL of contributions from individuals ▶	47834.06	90818.34
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	47834.06	90818.34
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	47834.06	90818.34

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	41138.61	60566.06
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	1605.21	1605.21
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	42743.82	62171.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	29750.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	47834.06
25. SUBTOTAL (add Line 23 and Line 24).....	77584.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	42743.82
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	34840.58

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N
Transaction ID :

Muriel Cole \$400 primary contribution overage reallocated to 2012 debt retirement--will provide written confirmation upon request.

Form/Schedule:
Transaction ID:

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
John Balint MD

Mailing Address 40 Autumn Dr
Apt 234

City Slingerlands State NY Zip Code 12159-9365

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

Name of Employer Albany Medical Center Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2013

Transaction ID : VN8Z2B055B4

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Sherry Billig

Mailing Address 3737 Ashley Way

City Owings Mills State MD Zip Code 21117-1429

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 16 / 2013

Transaction ID : VN8Z2B05464

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Robert J Bobb

Mailing Address 321 N Clark St
FI 2500

City Chicago State IL Zip Code 60654-4746

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

Name of Employer Self Occupation Investor

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
08 / 30 / 2013

Transaction ID : VN8Z2B054P8

Amount of Each Receipt this Period
500.00

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

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

1000.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Martha Bowsbey

Mailing Address 2600 Joseph Biggs Memorial Hwy

City North East State MD Zip Code 21901-1720

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

Name of Employer Not Employed 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
 08 / 07 / 2013

Transaction ID : VN8Z2B05P60

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Kevin Brien

Mailing Address 23956 Walnut Point Rd

City Chestertown State MD Zip Code 21620-5235

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

Name of Employer Washington College Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 03 / 2013

Transaction ID : VN8Z2B055N3

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Roger Burt

Mailing Address 310 Cleveland Rd

City Saint Michaels State MD Zip Code 21663-2854

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

Name of Employer Self Occupation Activist, Writer, Pyschiatrist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 21 / 2013

Transaction ID : VN8Z2B05573

Amount of Each Receipt this Period
 500.00

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

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

1050.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Peter Calabria

Mailing Address 46 Alpine Dr

City State Zip Code
Latham NY 12110-1725

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

Name of Employer Occupation
CL King and Associates, Inc. Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
406.56

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 21 / 2013

Transaction ID : VN8Z2B3RYM5

Amount of Each Receipt this Period
406.56

* In-Kind: Food/Supplies for fundraiser

B. Full Name (Last, First, Middle Initial)
Greysen F Carlson

Mailing Address 432 NE Thornberry Pl

City State Zip Code
Lees Summit MO 64064-1664

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

Name of Employer Occupation
GFC Strategies Founder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
982.50

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2013

Transaction ID : VN8Z2B44QN1

Amount of Each Receipt this Period
982.50

* In-Kind: Fundraising/Compliance Consulting

C. Full Name (Last, First, Middle Initial)
Harvey Cohen MD

Mailing Address 5691 Southmoor Ln

City State Zip Code
Englewood CO 80111-1043

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

Name of Employer Occupation
Self Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 06 / 2013

Transaction ID : VN8Z2B055Q9

Amount of Each Receipt this Period
200.00

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

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

1589.06

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Muriel Cole

Mailing Address 207 E Campus Ave

City Chestertown State MD Zip Code 21620-1651

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2013

Transaction ID : VN8Z2B07DZ4

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Muriel Cole

Mailing Address 207 E Campus Ave

City Chestertown State MD Zip Code 21620-1651

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2013

Transaction ID : VN8Z2B05P03

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Muriel Cole

Mailing Address 207 E Campus Ave

City Chestertown State MD Zip Code 21620-1651

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2013

Transaction ID : VN8Z2B40767

Amount of Each Receipt this Period
-400.00

[MEMO ITEM]
 * Re-designation of contribution on 8/3/13

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 10 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Muriel Cole

Mailing Address 207 E Campus Ave

City State Zip Code
Chestertown MD 21620-1651

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

Name of Employer Occupation
Not Employed Retired

Receipt For: 2012
 Primary General
 Other (specify) Debt General 2012

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 03 / 2013

Transaction ID : VN8Z2B407F8

Amount of Each Receipt this Period
400.00

[MEMO ITEM]
* Re-designation of contribution on 8/3/13 for 2012 General Debt Retirement

B. Full Name (Last, First, Middle Initial)
Babette Dalsheimer

Mailing Address 111 Hamlet Hill Rd

City State Zip Code
Baltimore MD 21210-1556

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

Name of Employer Occupation
North Baltimoe Ctr Social Worker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 21 / 2013

Transaction ID : VN8Z2B055E8

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Matthew Davis

Mailing Address 625 N Segoe Rd
Unit 507

City State Zip Code
Madison WI 53705-3196

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

Name of Employer Occupation
City Of Madison WI Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 12 / 2013

Transaction ID : VN8Z2B054E7

Amount of Each Receipt this Period
200.00

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

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

400.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Margery Delano

Mailing Address 12024 Iguana Bay

City State Zip Code
Boynton Beach FL 33436-2229

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

Name of Employer Occupation
Not Employed Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 21 / 2013

Transaction ID : VN8Z2B054T0

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Nancy L Dorman

Mailing Address 1329 Park Ave

City State Zip Code
Baltimore MD 21217-4104

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

Name of Employer Occupation
Not Employed Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2013

Transaction ID : VN8Z2B054R4

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Stuart Elsberg

Mailing Address 303 N Queen St

City State Zip Code
Chestertown MD 21620-1629

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

Name of Employer Occupation
Elsberg & Associates Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2013

Transaction ID : VN8Z2B05N83

Amount of Each Receipt this Period
750.00

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

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

1200.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Neal M Friedlander

Mailing Address 1320 Bolton St

City Baltimore State MD Zip Code 21217-4101

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

Name of Employer **GBMC** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2013

Transaction ID : VN8Z2B05448

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Caroline Gabel

Mailing Address 113 Hoffman Ln

City Chestertown State MD Zip Code 21620-1913

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

Name of Employer **Not Employed** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2013

Transaction ID : VN8Z2B05557

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Andrea Jill Grant

Mailing Address 15101 Springfield Rd

City Darnestown State MD Zip Code 20874-3413

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

Name of Employer **DLA Piper** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2013

Transaction ID : VN8Z2B054G1

Amount of Each Receipt this Period
 500.00

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

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

1750.00

**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 13 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Francis Greenburger

Mailing Address 55 5th Ave
FI 15

City New York State NY Zip Code 10003-4301

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

Name of Employer Time Equities Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2013

Transaction ID : VN8Z2B05NT6

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
David Grimes MD

Mailing Address 7207 Grouper Ct

City Wilmington State NC Zip Code 28409-5005

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

Name of Employer UNC Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2013

Transaction ID : VN8Z2B055H2

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Robert Hall

Mailing Address 17671 Irvine Blvd
Ste 103

City Tustin State CA Zip Code 92780-3128

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

Name of Employer Self Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2013

Transaction ID : VN8Z2B055M5

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 14 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

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

Mailing Address 6782 Cookes Hope Rd

City Easton State MD Zip Code 21601-8300

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

Name of Employer Not Employed Occupation 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 Y Y
 07 / 10 / 2013

Transaction ID : VN8Z2B055J0

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Allain Hardin

Mailing Address 3203 Prytania St

City New Orleans State LA Zip Code 70115-3416

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

Name of Employer self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2013

Transaction ID : VN8Z2B05NS8

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
F. Bart Harvey

Mailing Address 3 Midvale Rd

City Baltimore State MD Zip Code 21210-2113

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2013

Transaction ID : VN8Z2B05PQ5

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Christian Havemeyer

Mailing Address 24031 Walnut Point Rd

City Chestertown State MD Zip Code 21620-5238

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

Name of Employer Self Occupation Philanthropist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2013

Transaction ID : VN8Z2B054D9

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Charlotte Hawes

Mailing Address 311 S Queen St

City Chestertown State MD Zip Code 21620-1525

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2013

Transaction ID : VN8Z2B054F5

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Billy Hicks

Mailing Address 5429 Backlick Rd Ste 110

City Springfield State VA Zip Code 22151-3949

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

Name of Employer B. R. Hicks Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2013

Transaction ID : VN8Z2B05PZ8

Amount of Each Receipt this Period
 100.00

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

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

2950.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Billy Hicks

Mailing Address 5429 Backlick Rd
Ste 110

City Springfield State VA Zip Code 22151-3949

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

Name of Employer B. R. Hicks Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2013

Transaction ID : VN8Z2B05Q06

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Anita Hirsh

Mailing Address 3300 Oakdell Rd

City Studio City State CA Zip Code 91604-4138

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

Name of Employer Mercantile Center Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 10 / 2013

Transaction ID : VN8Z2B055P1

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
John Hoey

Mailing Address 4509 Roland Ave

City Baltimore State MD Zip Code 21210-2540

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

Name of Employer Y of Central Maryland Occupation 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
 09 / 17 / 2013

Transaction ID : VN8Z2B05NA9

Amount of Each Receipt this Period
1000.00

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

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

2100.00

**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 17 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Elizabeth Hughes

Mailing Address 2791 NY State Rd
12B

City Deansboro State NY Zip Code 13328

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

Name of Employer self Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 19 / 2013

Transaction ID : VN8Z2B05NV3

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Raymond Johnson

Mailing Address 8865 Blue Sea Dr

City Columbia State MD Zip Code 21046-1413

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

Name of Employer Not Employed 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
 08 / 05 / 2013

Transaction ID : VN8Z2B05NZ5

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
Ronald N Kahn

Mailing Address PO Box 590599

City San Francisco State CA Zip Code 94159-0599

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

Name of Employer Black Rock Occupation Global Head of Equity Research

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2013

Transaction ID : VN8Z2AZGWK1

Amount of Each Receipt this Period
 2500.00

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

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

3200.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Harry Kamen

Mailing Address 910 Park Ave

City State Zip Code
New York NY 10075-0255

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

Name of Employer Occupation
Not Employed 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
07 / 08 / 2013

Transaction ID : VN8Z2B05PX2

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Barry Koh

Mailing Address 27033 Rigbylot Rd

City State Zip Code
Easton MD 21601-7667

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

Name of Employer Occupation
Not Employed Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 13 / 2013

Transaction ID : VN8Z2B05498

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Albert H Kramer

Mailing Address 1111 23rd St NW
Ph 1B

City State Zip Code
Washington DC 20037-3317

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2013

Transaction ID : VN8Z2B054S2

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
James Lacey

Mailing Address 101 Oak Leaf Dr

City Chestertown State MD Zip Code 21620-1180

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

Name of Employer Patient First Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 09 / 2013

Transaction ID : VN8Z2B05NW1

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
John J LaFerla

Mailing Address 209 Birch Run Rd

City Chestertown State MD Zip Code 21620-1639

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

Name of Employer Self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 02 / 2013

Transaction ID : VN8Z2B05Q22

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
John J LaFerla

Mailing Address 209 Birch Run Rd

City Chestertown State MD Zip Code 21620-1639

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

Name of Employer Self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1025.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2013

Transaction ID : VN8Z2B05414

Amount of Each Receipt this Period
1000.00

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

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

1275.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Joseph LaFerla

Mailing Address 749 Cherokee Ave

City Saint Paul State MN Zip Code 55107-2514

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

Name of Employer Unemployed Occupation None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2013

Transaction ID : VN8Z2B05430

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Linda Lindsey

Mailing Address 8322 Shimmering Rock Rd

City Gainesville State VA Zip Code 20155-1772

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

Name of Employer Sentara Hospital Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 02 / 2013

Transaction ID : VN8Z2B05Q14

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Richard MacDowell

Mailing Address 36 Windsor Ct

City Delmar State NY Zip Code 12054-4304

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

Name of Employer Richard T. MacDowell, MD, PC Occupation Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 21 / 2013

Transaction ID : VN8Z2B05598

Amount of Each Receipt this Period
250.00

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 21 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Edmund MacLaughlin

Mailing Address 2206 Horns Point Rd

City State Zip Code
Cambridge MD 21613-3379

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

Name of Employer Self Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2013

Transaction ID : VN8Z2B05NN6

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Josephine Merck

Mailing Address 171 Cat Rock Rd

City State Zip Code
Cos Cob CT 06807-1202

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

Name of Employer Self Occupation Artist/Conservationist

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
 09 / 11 / 2013

Transaction ID : VN8Z2B47S20

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Olan Mills

Mailing Address 75 Broad St.
Suite 218

City State Zip Code
Chattanooga TN 37402-1024

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

Name of Employer Not Employed 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 Y Y
 08 / 26 / 2013

Transaction ID : VN8Z2B054X4

Amount of Each Receipt this Period
1000.00

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

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

1750.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) Ken Noble		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2013
Mailing Address 204 Brown St		Transaction ID : VN8Z2B05N50
City Chestertown	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Not Employed	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Diana W Parker		Date of Receipt M M / D D / Y Y Y Y 08 / 23 / 2013
Mailing Address P.O. 1011		Transaction ID : VN8Z2B054Z9
City Thomasville	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Retail	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Charlotte Perret		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2013
Mailing Address 707 S Gulfstream Ave Unit 1101		Transaction ID : VN8Z2B054K5
City Sarasota	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Not Employed	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

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

Mailing Address 6112 Copper Rose St NE

City Albuquerque State NM Zip Code 87111-8228

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

Name of Employer New Mexico School of Medicine Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 05 / 2013

Transaction ID : VN8Z2B055R7

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
James Ross

Mailing Address 17 Country Manor Ln
P.O. Box 488

City New Freedom State PA Zip Code 17349-9699

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

Name of Employer CEO Occupation Chester River Health System

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2013

Transaction ID : VN8Z2B05515

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Joan Salim

Mailing Address 5613 Boxhill Ln

City Baltimore State MD Zip Code 21210-2003

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

Name of Employer Harford County Health Dept. Occupation Health Policy Analyst-Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2013

Transaction ID : VN8Z2B05NP4

Amount of Each Receipt this Period
250.00

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

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

750.00

**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 24 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Thomas Sandusky

Mailing Address 25 Wharf Ct

City Berlin State MD Zip Code 21811-1829

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2013

Transaction ID : VN8Z2B05456

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
R. Ford Schumann

Mailing Address 506 Old McGinnes Rd

City Chestertown State MD Zip Code 21620-1924

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2013

Transaction ID : VN8Z2AZD5X7

Amount of Each Receipt this Period
2000.00

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

Mailing Address 3600 Clipper Mill Rd Ste 401

City Baltimore State MD Zip Code 21211-1956

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

Name of Employer Shapiro Negotiations Institute Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 26 / 2013

Transaction ID : VN8Z2B05PB0

Amount of Each Receipt this Period
200.00

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

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

2400.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Steven Sharfstein MD

Mailing Address 6 E Bishops Rd

City Baltimore State MD Zip Code 21218-2312

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

Name of Employer Shgeppard Pratt Health Systems Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2013

Transaction ID : VN8Z2B055D0

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Alan Sieroty

Mailing Address 6022 Wilshire Blvd Ste 201

City Los Angeles State CA Zip Code 90036-3616

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

Name of Employer Sieroty Co. Inc. Occupation Real Estate Manager

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
 08 / 13 / 2013

Transaction ID : VN8Z2B05549

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Robert N Smelkinson

Mailing Address 4603 Kernwood Ave

City Baltimore State MD Zip Code 21212-4718

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

Name of Employer Not Employed Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2013

Transaction ID : VN8Z2B053Z9

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Anne D Taft

Mailing Address 38 Oakridge Dr

City Binghamton State NY Zip Code 13903-2125

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

Name of Employer Self Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2013

Transaction ID : VN8Z2B054H9

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Henry Thiede

Mailing Address PO Box 405

City Pittsford State NY Zip Code 14534-0405

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

Name of Employer University of Rochester Occupation Professor Emeritus

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2013

Transaction ID : VN8Z2B054B3

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Joseph Tompkins

Mailing Address 3787 Fort Charles Dr

City Naples State FL Zip Code 34102-7934

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 17 / 2013

Transaction ID : VN8Z2B05NR0

Amount of Each Receipt this Period
 250.00

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 27 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Michael Watkins

Mailing Address 14 Buchanan Rd

City West Roxbury State MA Zip Code 02132-7707

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

Name of Employer Mass General Hospital Occupation Vascular Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2013

Transaction ID : VN8Z2B47S04

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Elizabeth Weller

Mailing Address 216 Duke Of Kent St

City Chestertown State MD Zip Code 21620-2854

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

Name of Employer Kent County Public Schools Occupation Educator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2013

Transaction ID : VN8Z2B053T9

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
John Wolf

Mailing Address PO Box 1429

City Sanibel State FL Zip Code 33957-1429

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

Name of Employer Not Employed 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
 08 / 13 / 2013

Transaction ID : VN8Z2B05523

Amount of Each Receipt this Period
 1000.00

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

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

1700.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Nelson Adams

Mailing Address 1098 NE 95th St

City Miami Shores State FL Zip Code 33138-2548

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

Name of Employer Self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2013

Transaction ID : VN8Z2B3QHM8

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8060.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2013

Transaction ID : VN8Z2B3QHM8E

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Margaret Allen

Mailing Address 311 Broxton Rd

City Baltimore State MD Zip Code 21212-3532

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

Name of Employer AGM Financial Services, Inc Occupation Mortgage Banker

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
 08 / 07 / 2013

Transaction ID : VN8Z2B3QGM6

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

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

750.00

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8060.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		15		2013

Transaction ID : VN8Z2B3QGM6E

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Mayer Baker

Mailing Address **7332 Brightside Rd**

City **Baltimore** State **MD** Zip Code **21212-1011**

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

Name of Employer _____ Occupation _____
Not Employed **Homemaker**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		08		2013

Transaction ID : VN8Z2B3QGP1

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				250.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8060.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		15		2013

Transaction ID : VN8Z2B3QGP1E

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

_____	_____	_____	_____	_____
				250.00
_____	_____	_____	_____	_____

**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 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Walker Buckner

Mailing Address 674 Unionville Rd

City State Zip Code
Kennett Square PA 19348-4712

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

Name of Employer Self Occupation Artist

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
 09 / 06 / 2013

Transaction ID : VN8Z2B3QHP4

Amount of Each Receipt this Period
1000.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Self Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8060.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2013

Transaction ID : VN8Z2B3QHP4E

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

Mailing Address 140 Magnolia Ave

City State Zip Code
Glendale OH 45246-4507

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

Name of Employer Self Occupation Landlord

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2013

Transaction ID : VN8Z2B3QH68

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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 31 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8060.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		05		2013

Transaction ID : VN8Z2B3QH68E

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
David DesJardins

Mailing Address **1538 Burlingame Ave**

City **Burlingame** State **CA** Zip Code **94010-5102**

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

Name of Employer **Self** Occupation **Investor**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2013

Transaction ID : VN8Z2B3Q893

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				500.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8060.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2013

Transaction ID : VN8Z2B3Q893E

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

_____	_____	_____	_____	_____
				500.00
_____	_____	_____	_____	_____

**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 32 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Sarah Faulkner

Mailing Address 108 Sumach St

City State Zip Code
Lookout Mtn TN 37350-1132

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

Name of Employer Occupation
Not Employed None

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
09 / 17 / 2013

Transaction ID : VN8Z2B3QHZ5

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8060.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2013

Transaction ID : VN8Z2B3QHZE

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Howard Freedlander

Mailing Address 108 Brookletts Ave

City State Zip Code
Easton MD 21601-2904

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

Name of Employer Occupation
Not Employed None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 01 / 2013

Transaction ID : VN8Z2B3QHC5

Amount of Each Receipt this Period
200.00

* Earmarked Contribution: See Below

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

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

700.00

**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 33 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8060.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		05		2013

Transaction ID : VN8Z2B3QHC5E

Amount of Each Receipt this Period

200.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Bobette Gorden

Mailing Address **2248 S Forest Ave**

City **Tempe** State **AZ** Zip Code **85282-2145**

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

Name of Employer _____ Occupation _____
Influence at Work **Marketing**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		29		2013

Transaction ID : VN8Z2B3QHB7

Amount of Each Receipt this Period

250.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8060.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		05		2013

Transaction ID : VN8Z2B3QHB7E

Amount of Each Receipt this Period

250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

250.00

**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 34 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Joann Hilton Dahlgren

Mailing Address 1935 Severn Grove Rd

City State Zip Code
Annapolis MD 21401-2936

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

Name of Employer Occupation
Not Employed Retired--College Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 04 / 2013

Transaction ID : VN8Z2B3QHK0

Amount of Each Receipt this Period
200.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8060.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 11 / 2013

Transaction ID : VN8Z2B3QHK0E

Amount of Each Receipt this Period
200.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Nancy Kader

Mailing Address 10301 Dunfries Rd

City State Zip Code
Vienna VA 22181-4002

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

Name of Employer Occupation
Director Pal-Tech, Inc.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 03 / 2013

Transaction ID : VN8Z2B3QHN6

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

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

450.00

**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 35 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **8060.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
09 / 11 / 2013

Transaction ID : VN8Z2B3QHN6E

Amount of Each Receipt this Period
 _____ **250.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Kenneth Leiner

Mailing Address **2630 Adams Mill Rd NW**

City **Washington** State **DC** Zip Code **20009-2151**

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

Name of Employer **Ken Leiner Associates, Inc.** Occupation
Recruiter

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
08 / 31 / 2013

Transaction ID : VN8Z2B3QHD3

Amount of Each Receipt this Period
 _____ **200.00**

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **8060.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
09 / 05 / 2013

Transaction ID : VN8Z2B3QHD3E

Amount of Each Receipt this Period
 _____ **200.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

_____ **200.00**

**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 36 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Robert Lupi

Mailing Address 5 W 86th St

City State Zip Code
New York NY 10024-3603

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

Name of Employer Self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 10 / 2013

Transaction ID : VN8Z2B3QHW2

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8060.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 19 / 2013

Transaction ID : VN8Z2B3QHW2E

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Veronica McClaskey

Mailing Address 6112 NW El Rey Dr

City State Zip Code
Camas WA 98607-9124

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

Name of Employer Not Employed Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2013

Transaction ID : VN8Z2B3QHT6

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

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

500.00

**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 37 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **8060.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 19 / 2013

Transaction ID : VN8Z2B3QHT6E

Amount of Each Receipt this Period
 _____ **250.00** _____

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Philip Perkins

Mailing Address **311 Broxton Rd**

City **Baltimore** State **MD** Zip Code **21212-3532**

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

Name of Employer **AGM Financial Services** Occupation **Mortgage Banker**

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
08 / 07 / 2013

Transaction ID : VN8Z2B3QGQ9

Amount of Each Receipt this Period
 _____ **500.00** _____

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **8060.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 15 / 2013

Transaction ID : VN8Z2B3QGQ9E

Amount of Each Receipt this Period
 _____ **500.00** _____

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

_____ **500.00** _____

**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 38 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Miles Rubin

Mailing Address 3035 Chain Bridge Rd NW

City Washington State DC Zip Code 20016-3409

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2013

Transaction ID : VN8Z2B3QHA9

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8060.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2013

Transaction ID : VN8Z2B3QHA9E

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Maida Schifter

Mailing Address 1606 Belvedere Blvd

City Silver Spring State MD Zip Code 20902-3902

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

Name of Employer Not Employed Occupation None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2013

Transaction ID : VN8Z2B3QEK4

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

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

500.00

**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 39 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **8060.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 22 / 2013

Transaction ID : VN8Z2B3QE4E

Amount of Each Receipt this Period
 _____ **250.00** _____

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Elizabeth Strickler

Mailing Address **300 Central Park W
Apt 25D**

City **New York** State **NY** Zip Code **10024-1595**

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

Name of Employer **Not Employed** Occupation **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 Y Y
08 / 22 / 2013

Transaction ID : VN8Z2B3QH7

Amount of Each Receipt this Period
 _____ **500.00** _____

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **8060.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 29 / 2013

Transaction ID : VN8Z2B3QH7E

Amount of Each Receipt this Period
 _____ **500.00** _____

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

_____ **500.00** _____

**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 40 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Deanna Troub

Mailing Address 3703 95th St

City Lubbock State TX Zip Code 79423-3808

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

Name of Employer Not Employed Occupation None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2013

Transaction ID : VN8Z2B3QEN0

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8060.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2013

Transaction ID : VN8Z2B3QEN0E

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Mark Tushnet

Mailing Address 1416 Holly St NW

City Washington State DC Zip Code 20012-1526

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

Name of Employer Harvard University Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2013

Transaction ID : VN8Z2B3QH84

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

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

500.00

**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 41 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8060.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		05		2013

Transaction ID : VN8Z2B3QH84E

Amount of Each Receipt this Period

250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Judith Wagner

Mailing Address **63 French Rd**

City **Gilmanton** State **NH** Zip Code **03237-5502**

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

Name of Employer _____ Occupation _____
Not Employed **None**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2013

Transaction ID : VN8Z2B3QEB1

Amount of Each Receipt this Period

250.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8060.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		07		2013

Transaction ID : VN8Z2B3QEB1E

Amount of Each Receipt this Period

250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

250.00

**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 42 OF 95
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

A. Full Name (Last, First, Middle Initial)
Bahr Weiss

Mailing Address 1612 Ash Valley Dr

City Nashville State TN Zip Code 37215-4202

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

Name of Employer Peabody Collge Occupation Educator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2013

Transaction ID : VN8Z2B3QHS8

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8060.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2013

Transaction ID : VN8Z2B3QHS8E

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

40964.06

**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 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2013
Mailing Address PO Box 382110			Amount of Each Disbursement this Period 27.65
City Cambridge	State MA	Zip Code 02238-2110	
Purpose of Disbursement Electronic processing fees payment		Candidate Name	Transaction ID : VN7ZT9M9350
Category/Type 003			
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)		Electronic processing fees payment
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2013
Mailing Address PO Box 382110			Amount of Each Disbursement this Period 19.76
City Cambridge	State MA	Zip Code 02238-2110	
Purpose of Disbursement Electronic processing fees payment		Candidate Name	Transaction ID : VN7ZT9M9368
Category/Type 003			
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)		Electronic processing fees payment
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2013
Mailing Address PO Box 382110			Amount of Each Disbursement this Period 3.95
City Cambridge	State MA	Zip Code 02238-2110	
Purpose of Disbursement Electronic processing fees payment		Candidate Name	Transaction ID : VN7ZT9M9376
Category/Type 003			
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)		Electronic processing fees payment
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	51.36
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 44 OF 95			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 13.83
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Electronic processing fees payment	Transaction ID : VN7ZT9M9384
Candidate Name	Category/ Type 003	
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)	Electronic processing fees payment
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 0.80
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Electronic processing fees payment	Transaction ID : VN7ZT9M9391
Candidate Name	Category/ Type 003	
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)	Electronic processing fees payment
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 51.36
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Electronic processing fees payment	Transaction ID : VN7ZT9M93A9
Candidate Name	Category/ Type 003	
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)	Electronic processing fees payment
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	65.99
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 45 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 3.95
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Electronic processing fees payment	Transaction ID : VN7ZT9M93B7
Candidate Name	Category/ Type 003	
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)	Electronic processing fees payment
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 19.75
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Electronic processing fees payment	Transaction ID : VN7ZT9M93C5
Candidate Name	Category/ Type 003	
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)	Electronic processing fees payment
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 57.70
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Electronic processing fees payment	Transaction ID : VN7ZT9M93D3
Candidate Name	Category/ Type 003	
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)	Electronic processing fees payment
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	81.40
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 46 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 67.16
City Cambridge	State MA	
Zip Code 02238-2110		Electronic processing fees payment
Purpose of Disbursement Electronic processing fees payment		
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 39.52
City Cambridge	State MA	
Zip Code 02238-2110		Electronic processing fees payment
Purpose of Disbursement Electronic processing fees payment		
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2013
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 19.75
City Cambridge	State MA	
Zip Code 02238-2110		Electronic processing fees payment
Purpose of Disbursement Electronic processing fees payment		
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	126.43
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 47 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013	
Mailing Address PO Box 382110			Amount of Each Disbursement this Period 171.26	
City Cambridge	State MA	Zip Code 02238-2110	Transaction ID : VN7ZT9M93M8	
Purpose of Disbursement Electronic processing fees payment		Category/ Type 003	Electronic processing fees payment	
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) B. Best Buy			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2013	
Mailing Address 4500 Wisconsin Ave NW			Amount of Each Disbursement this Period 95.38	
City Washington	State DC	Zip Code 20016-4628	Transaction ID : VN7ZT9M8BR8	
Purpose of Disbursement Office Supplies		Category/ Type 006		
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) c. Beverly's Family Restaurant			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013	
Mailing Address 11 Washington Square Shopping Cent			Amount of Each Disbursement this Period 10.60	
City Chestertown	State MD	Zip Code 21620	Transaction ID : VN7ZT9MA8H3	
Purpose of Disbursement Travel Expenses		Category/ Type 002		
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:				

SUBTOTAL of Disbursements This Page (optional).....	277.24
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 48 OF 95		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Peter Calabria		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2013
Mailing Address 46 Alpine Dr		Amount of Each Disbursement this Period 406.56 Transaction ID : VN8Z2B3RYM5I
City Latham	State NY	
Zip Code 12110-1725	Purpose of Disbursement Food/Supplies for fundraiser	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Greysen F Carlson		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address 432 NE Thornberry Pl		Amount of Each Disbursement this Period 982.50 Transaction ID : VN8Z2B44QN1I
City Lees Summit	State MO	
Zip Code 64064-1664	Purpose of Disbursement Fundraising/Compliance Consulting	* In-Kind Received
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) c. College Heights Citgo		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2013
Mailing Address 513 Washington Ave		Amount of Each Disbursement this Period 63.85 Transaction ID : VN7ZT9M8CP5
City Chestertown	State MD	
Zip Code 21620-1217	Purpose of Disbursement Travel Expense	* In-Kind Received
Candidate Name	Category/Type 002	
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:		

SUBTOTAL of Disbursements This Page (optional).....	1452.91
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 49 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. College Heights Citgo		Date of Disbursement MM / DD / YYYY 08 / 02 / 2013
Mailing Address 513 Washington Ave		Amount of Each Disbursement this Period 40.00 Transaction ID : VN7ZT9M8CX0
City Chestertown	State MD	
Zip Code 21620-1217	Purpose of Disbursement Travel Expense	Category/ Type 002
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) B. College Heights Citgo		Date of Disbursement MM / DD / YYYY 08 / 10 / 2013
Mailing Address 513 Washington Ave		Amount of Each Disbursement this Period 20.50 Transaction ID : VN7ZT9M8D53
City Chestertown	State MD	
Zip Code 21620-1217	Purpose of Disbursement Travel Expense	Category/ Type 002
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) c. College Heights Citgo		Date of Disbursement MM / DD / YYYY 08 / 13 / 2013
Mailing Address 513 Washington Ave		Amount of Each Disbursement this Period 63.30 Transaction ID : VN7ZT9M8D87
City Chestertown	State MD	
Zip Code 21620-1217	Purpose of Disbursement Travel Expense	Category/ Type 002
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:	

SUBTOTAL of Disbursements This Page (optional).....	123.80
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 50 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. College Heights Citgo			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2013
Mailing Address 513 Washington Ave			Amount of Each Disbursement this Period 39.01 Transaction ID : VN7ZT9M8D95
City Chestertown	State MD	Zip Code 21620-1217	
Purpose of Disbursement Travel Expense	Candidate Name		Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. College Heights Citgo			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2013
Mailing Address 513 Washington Ave			Amount of Each Disbursement this Period 50.02 Transaction ID : VN7ZT9M8A57
City Chestertown	State MD	Zip Code 21620-1217	
Purpose of Disbursement Travel Expense	Candidate Name		Category/ Type 002
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) c. College Heights Citgo			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2013
Mailing Address 513 Washington Ave			Amount of Each Disbursement this Period 62.40 Transaction ID : VN7ZT9M8AN3
City Chestertown	State MD	Zip Code 21620-1217	
Purpose of Disbursement Travel Expense	Candidate Name		Category/ Type 002
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:			

SUBTOTAL of Disbursements This Page (optional).....	151.43
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 51 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Brian Cordova		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 258 Philadelphia Ave		Amount of Each Disbursement this Period 1150.00 Transaction ID : VN7ZT9M8W54
City Chambersburg	State PA	
Zip Code 17201-1652	Purpose of Disbursement Fundraising Consulting	Category/ Type 001
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) B. Democratic Central Committee Worcester County		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2013
Mailing Address PO Box 34		Amount of Each Disbursement this Period 30.00 Transaction ID : VN7ZT9M8JA3
City Berlin	State MD	
Zip Code 21811-0034	Purpose of Disbursement Tickets to Breakfast	Category/ Type 011
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) c. Democratic Club of Ocean City/Berlin		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2013
Mailing Address PO Box 3196		Amount of Each Disbursement this Period 30.00 Transaction ID : VN7ZT9M93Y7
City Ocean City	State MD	
Zip Code 21843-3196	Purpose of Disbursement Tickets to Event	Category/ Type 011
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:	

SUBTOTAL of Disbursements This Page (optional).....	1210.00
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 52 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Democratic State Central Committee Maryland		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2013
Mailing Address 33 West St Ste 200		Amount of Each Disbursement this Period 1075.00 Transaction ID : VN7ZT9M8XJ0
City Annapolis State MD Zip Code 21401-2420	Purpose of Disbursement VAN fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dr. Don's Buttons, Badges, & More		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2013
Mailing Address 3906 W Morrow Dr		Amount of Each Disbursement this Period 252.94 Transaction ID : VN7ZT9M8CK1
City Glendale State AZ Zip Code 85308-7531	Purpose of Disbursement Lapel Stickers Candidate Name Category/Type 006	
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) c. Everest Food Mart LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2013
Mailing Address 201 N Liberty St		Amount of Each Disbursement this Period 32.50 Transaction ID : VN7ZT9M8B00
City Centreville State MD Zip Code 21617-1022	Purpose of Disbursement Travel Expense Candidate Name Category/Type 002	
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:	

SUBTOTAL of Disbursements This Page (optional).....	1360.44
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VN7ZT9M8XJ0

Fee for access to the MD voter activation network

Form/Schedule:

Transaction ID:

**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 54 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Exxon Mobil		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2013
Mailing Address 1926 West St		Amount of Each Disbursement this Period 68.71
City Annapolis	State MD Zip Code 21401-3931	
Purpose of Disbursement Travel Expense	Category/Type 002	Transaction ID : VN7ZT9M8BK8
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) B. GoDaddy.com		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2013
Mailing Address 14455 N Hayden Rd Ste 226		Amount of Each Disbursement this Period 167.76
City Scottsdale	State AZ Zip Code 85260-6993	
Purpose of Disbursement Domain Name	Category/Type 001	Transaction ID : VN7ZT9M8C50
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) c. Gotts Court Parking Garage		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2013
Mailing Address 25 Calvert St.		Amount of Each Disbursement this Period 9.00
City Annapolis	State MD Zip Code 21401	
Purpose of Disbursement Parking	Category/Type 007	Transaction ID : VN7ZT9M8BN4
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:		

SUBTOTAL of Disbursements This Page (optional).....	245.47
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 55 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Keauna Gregory		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 1222 Sedgefield Rd		Amount of Each Disbursement this Period 2000.00 Transaction ID : VN7ZT9M8VN8
City Marietta	State GA	
Zip Code 30062-2343	Purpose of Disbursement Political Consulting	Category/ Type 001
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) B. Keauna Gregory		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2013
Mailing Address 1222 Sedgefield Rd		Amount of Each Disbursement this Period 2000.00 Transaction ID : VN7ZT9M8VF0
City Marietta	State GA	
Zip Code 30062-2343	Purpose of Disbursement Political Consulting	Category/ Type 001
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) C. Keauna Gregory		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2013
Mailing Address 1222 Sedgefield Rd		Amount of Each Disbursement this Period 2000.00 Transaction ID : VN7ZT9M8V44
City Marietta	State GA	
Zip Code 30062-2343	Purpose of Disbursement Political Consulting	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	6000.00
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 56 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. High's of Baltimore #36		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2013
Mailing Address 158 Old Mill Bottom Rd S		Amount of Each Disbursement this Period 74.80
City Annapolis State MD Zip Code 21409-5501	Purpose of Disbursement Travel Expense 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)	Transaction ID : VN7ZT9M8BS6
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) B. Hillside Quick Service Motel		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2013
Mailing Address 2630 Centreville Rd		Amount of Each Disbursement this Period 65.40
City Centreville State MD Zip Code 21617-2069	Purpose of Disbursement Travel Expense 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)	Transaction ID : VN7ZT9M8DF2
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) c. Jan Crawford Communications		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2013
Mailing Address 23031 St Louis Rd		Amount of Each Disbursement this Period 1500.00
City Middleburg State VA Zip Code 20117-3923	Purpose of Disbursement Political Consulting 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)	Transaction ID : VN7ZT9M8WV8
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	1640.20
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VN7ZT9M8WV8

Media and general consulting fees

Form/Schedule:

Transaction ID:

**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 58 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Jun's Centreville Citgo Inc			Date of Disbursement MM / DD / YYYY 07 / 19 / 2013
Mailing Address 426 S Commerce St			Amount of Each Disbursement this Period 78.31 Transaction ID : VN7ZT9M8CD4
City Centreville	State MD	Zip Code 21617-1220	
Purpose of Disbursement Travel Expense		Category/ Type 002	
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) B. Jun's Centreville Citgo Inc			Date of Disbursement MM / DD / YYYY 09 / 16 / 2013
Mailing Address 426 S Commerce St			Amount of Each Disbursement this Period 60.17 Transaction ID : VN7ZT9M8B68
City Centreville	State MD	Zip Code 21617-1220	
Purpose of Disbursement Travel Expense		Category/ Type 002	
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) C. Kent County Democratic Central Committee			Date of Disbursement MM / DD / YYYY 08 / 08 / 2013
Mailing Address PO Box 128			Amount of Each Disbursement this Period 150.00 Transaction ID : VN7ZT9M8D12
City Chestertown	State MD	Zip Code 21620-0128	
Purpose of Disbursement Tickets for Eastern Shore Democratic Summit		Category/ Type 011	
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:			

SUBTOTAL of Disbursements This Page (optional).....	288.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Lawrence LaFerla			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013	
Mailing Address 17-14-201 Kamino-cho			Amount of Each Disbursement this Period 524.50	
City Nishinomiya-shi, Hyogo-ken	State AA	Zip Code 6638021	Transaction ID : VN7ZT9M99C8	
Purpose of Disbursement Website Design Fees		Category/ Type 001		
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) B. Lowes Home Improvement			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2013	
Mailing Address 501 Glebe Rd			Amount of Each Disbursement this Period 42.88	
City Easton	State MD	Zip Code 21601-3203	Transaction ID : VN7ZT9M8D61	
Purpose of Disbursement Office Supplies		Category/ Type 006		
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) C. Main Street Business Solutions, Inc			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013	
Mailing Address 102 Chester Vlg			Amount of Each Disbursement this Period 756.25	
City Chester	State MD	Zip Code 21619-2629	Transaction ID : VN7ZT9M8W62	
Purpose of Disbursement Compliance Consulting Fees		Category/ Type 001		
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:				

SUBTOTAL of Disbursements This Page (optional).....	1323.63
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 60 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Main Street Business Solutions, Inc		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2013
Mailing Address 102 Chester Vlg		Amount of Each Disbursement this Period 1617.80 Transaction ID : VN7ZT9M8JB1
City Chester	State MD	
Zip Code 21619-2629	Purpose of Disbursement Compliance Consulting Fees	Category/ Type 001
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) B. Ashley McNeil Coleman		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 1319 Covington St		Amount of Each Disbursement this Period 290.00 Transaction ID : VN7ZT9M8TS9
City Baltimore	State MD	
Zip Code 21230-4328	Purpose of Disbursement Fundraising Consulting	Category/ Type 001
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) c. Ashley McNeil Coleman		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2013
Mailing Address 1319 Covington St		Amount of Each Disbursement this Period 510.00 Transaction ID : VN7ZT9M8TQ3
City Baltimore	State MD	
Zip Code 21230-4328	Purpose of Disbursement Fundraising Consulting	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	2417.80
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 61 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Paychex Payroll Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2013
Mailing Address 700 Red Brook Blvd Ste 200		Amount of Each Disbursement this Period 2460.60 Transaction ID : VN7ZT9M9945
City Owings Mills	State MD Zip Code 21117-5185	
Purpose of Disbursement Payroll	Category/Type 001	
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) B. Paychex Payroll Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2013
Mailing Address 700 Red Brook Blvd Ste 200		Amount of Each Disbursement this Period 37.20 Transaction ID : VN7ZT9M93S8
City Owings Mills	State MD Zip Code 21117-5185	
Purpose of Disbursement Payroll Processing Fees	Category/Type 001	
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) C. Paychex Payroll Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2013
Mailing Address 700 Red Brook Blvd Ste 200		Amount of Each Disbursement this Period 976.54 Transaction ID : VN7ZT9M9953
City Owings Mills	State MD Zip Code 21117-5185	
Purpose of Disbursement Federal and State Payroll Taxes	Category/Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional).....	3474.34
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 62 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Paychex Payroll Services			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2013
Mailing Address 700 Red Brook Blvd Ste 200			Amount of Each Disbursement this Period 497.50 Transaction ID : VN7ZT9M9961
City Owings Mills	State MD	Zip Code 21117-5185	
Purpose of Disbursement Payroll	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Paychex Payroll Services			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2013
Mailing Address 700 Red Brook Blvd Ste 200			Amount of Each Disbursement this Period 3202.84 Transaction ID : VN7ZT9M9978
City Owings Mills	State MD	Zip Code 21117-5185	
Purpose of Disbursement Payroll	Candidate Name		Category/ Type 001
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) C. Paychex Payroll Services			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2013
Mailing Address 700 Red Brook Blvd Ste 200			Amount of Each Disbursement this Period 42.67 Transaction ID : VN7ZT9M93V4
City Owings Mills	State MD	Zip Code 21117-5185	
Purpose of Disbursement Payroll Processing Fees	Candidate Name		Category/ Type 001
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:			

SUBTOTAL of Disbursements This Page (optional).....	3743.01
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 63 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Paychex Payroll Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2013
Mailing Address 700 Red Brook Blvd Ste 200		Amount of Each Disbursement this Period 1243.00
City Owings Mills	State MD Zip Code 21117-5185	
Purpose of Disbursement Federal and State Payroll Taxes		Transaction ID : VN7ZT9M9986
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex Payroll Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2013
Mailing Address 700 Red Brook Blvd Ste 200		Amount of Each Disbursement this Period 3943.50
City Owings Mills	State MD Zip Code 21117-5185	
Purpose of Disbursement Payroll		Transaction ID : VN7ZT9M9994
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Paychex Payroll Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2013
Mailing Address 700 Red Brook Blvd Ste 200		Amount of Each Disbursement this Period 42.47
City Owings Mills	State MD Zip Code 21117-5185	
Purpose of Disbursement Payroll Processing Fees		Transaction ID : VN7ZT9M93W2
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5228.97
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 64 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Paychex Payroll Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2013
Mailing Address 700 Red Brook Blvd Ste 200		Amount of Each Disbursement this Period 1490.50 Transaction ID : VN7ZT9M99A2
City Owings Mills	State MD Zip Code 21117-5185	
Purpose of Disbursement Federal and State Payroll Taxes	Category/Type 001	
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) B. Paychex Payroll Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address 700 Red Brook Blvd Ste 200		Amount of Each Disbursement this Period 5171.72 Transaction ID : VN7ZT9M99B0
City Owings Mills	State MD Zip Code 21117-5185	
Purpose of Disbursement Payroll	Category/Type 001	
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) c. PayPal		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address PO Box 45950		Amount of Each Disbursement this Period 377.83 Transaction ID : VN7ZT9M8CJ3
City Omaha	State NE Zip Code 68145-0950	
Purpose of Disbursement Payment for processing fees for the quarter	Category/Type 003	
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)	Payment for processing fees for the quarter
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7040.05
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 65 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Pilot Travel Center		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2013
Mailing Address 31 Heather Ln		Amount of Each Disbursement this Period 44.03
City Perryville	State MD	
Zip Code 21903-2548	Purpose of Disbursement Travel Expense	Transaction ID : VN7ZT9M8CB8
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piney Creek Xtra Fuels		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2013
Mailing Address 2120 Piney Creek Rd		Amount of Each Disbursement this Period 61.23
City Chester	State MD	
Zip Code 21619-2411	Purpose of Disbursement Travel Expense	Transaction ID : VN7ZT9M8AS5
Candidate Name	002 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) c. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2013
Mailing Address 6502 Church Hill Rd		Amount of Each Disbursement this Period 55.28
City Chestertown	State MD	
Zip Code 21620-2387	Purpose of Disbursement Travel Expense	Transaction ID : VN7ZT9M8BX7
Candidate Name	002 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:		

SUBTOTAL of Disbursements This Page (optional).....	160.54
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 66 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2013
Mailing Address 6502 Church Hill Rd		Amount of Each Disbursement this Period 79.31 Transaction ID : VN7ZT9M8BY5
City Chestertown	State MD	
Purpose of Disbursement Travel Expense		Category/ Type 002
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) B. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2013
Mailing Address 7655 Ocean Gtwy		Amount of Each Disbursement this Period 60.63 Transaction ID : VN7ZT9M8CN7
City Easton	State MD	
Purpose of Disbursement Travel Expense		Category/ Type 002
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) c. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2013
Mailing Address 6502 Church Hill Rd		Amount of Each Disbursement this Period 37.05 Transaction ID : VN7ZT9M8CW2
City Chestertown	State MD	
Purpose of Disbursement Travel Expense		Category/ Type 002
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:		

SUBTOTAL of Disbursements This Page (optional).....	176.99
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 67 OF 95	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Royal Farms		Date of Disbursement MM / DD / YYYY 08 / 03 / 2013
Mailing Address 7655 Ocean Gtwy		Amount of Each Disbursement this Period 56.67
City Easton	State MD	
Zip Code 21601-8621	Purpose of Disbursement Travel Expense	Transaction ID : VN7ZT9M8CY8
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) B. Royal Farms		Date of Disbursement MM / DD / YYYY 08 / 10 / 2013
Mailing Address 6502 Church Hill Rd		Amount of Each Disbursement this Period 78.88
City Chestertown	State MD	
Zip Code 21620-2387	Purpose of Disbursement Travel Expense	Transaction ID : VN7ZT9M8D79
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) c. Royal Farms		Date of Disbursement MM / DD / YYYY 08 / 16 / 2013
Mailing Address 32303 Queen Anne Hwy		Amount of Each Disbursement this Period 70.94
City Queen Anne	State MD	
Zip Code 21657-1552	Purpose of Disbursement Travel Expense	Transaction ID : VN7ZT9M8DH8
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:		

SUBTOTAL of Disbursements This Page (optional).....	206.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2013
Mailing Address 105 Clay Dr		Amount of Each Disbursement this Period 76.01
City Queenstown	State MD	
Purpose of Disbursement Travel Expense	Category/ Type 002	
Candidate Name		Transaction ID : VN7ZT9M8DA3
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2013
Mailing Address 6502 Church Hill Rd		Amount of Each Disbursement this Period 62.57
City Chestertown	State MD	
Purpose of Disbursement Travel Expense	Category/ Type 002	
Candidate Name		Transaction ID : VN7ZT9M8AB4
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2013
Mailing Address 105 Clay Dr		Amount of Each Disbursement this Period 58.67
City Queenstown	State MD	
Purpose of Disbursement Travel Expense	Category/ Type 002	
Candidate Name		Transaction ID : VN7ZT9M8B91
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	197.25
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 69 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2013
Mailing Address 7655 Ocean Gtwy		Amount of Each Disbursement this Period 62.30
City Easton	State MD	
Zip Code 21601-8621		
Purpose of Disbursement Travel Expense		Category/ Type 002
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) B. Seven Eleven #17214		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2013
Mailing Address 730 E College Pkwy		Amount of Each Disbursement this Period 60.00
City Annapolis	State MD	
Zip Code 21409-5688		
Purpose of Disbursement Travel Expense		Category/ Type 002
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) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2013
Mailing Address 8276 Elliott Rd		Amount of Each Disbursement this Period 45.01
City Easton	State MD	
Zip Code 21601-7132		
Purpose of Disbursement Travel Expense		Category/ Type 002
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: _____	

SUBTOTAL of Disbursements This Page (optional).....	167.31
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 70 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2013
Mailing Address 887 Washington Ave		Amount of Each Disbursement this Period 50.48
City Chestertown	State MD	
Zip Code 21620-1003	Purpose of Disbursement Travel Expense	Transaction ID : VN7ZT9M8D04
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SonicPrint.com		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2013
Mailing Address 5018 Tampa West Blvd		Amount of Each Disbursement this Period 82.00
City Tampa	State FL	
Zip Code 33634-2412	Purpose of Disbursement Business Cards	Transaction ID : VN7ZT9M8BT4
Candidate Name	006 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) c. SonicPrint.com		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2013
Mailing Address 5018 Tampa West Blvd		Amount of Each Disbursement this Period 272.00
City Tampa	State FL	
Zip Code 33634-2412	Purpose of Disbursement Remit Envelopes	Transaction ID : VN7ZT9M8D20
Candidate Name	001 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:		

SUBTOTAL of Disbursements This Page (optional).....	404.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2013
Mailing Address 12641 Ocean Gtwy Ste 96		Amount of Each Disbursement this Period 20.67
City Ocean City	State MD	
Zip Code 21842-9527	Purpose of Disbursement Printing Fees	Transaction ID : VN7ZT9M8C01
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sunoco - Newark, DE		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2013
Mailing Address 1106 S College Ave		Amount of Each Disbursement this Period 40.19
City Newark	State DE	
Zip Code 19713-2308	Purpose of Disbursement Travel Expense	Transaction ID : VN7ZT9M8CF9
Candidate Name	Category/Type 002	
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) c. Sunoco - Schenectady, NY		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2013
Mailing Address 717 Nott St		Amount of Each Disbursement this Period 67.58
City Schenectady	State NY	
Zip Code 12308-2216	Purpose of Disbursement Travel Expense	Transaction ID : VN7ZT9M8CG7
Candidate Name	Category/Type 002	
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:		

SUBTOTAL of Disbursements This Page (optional).....	128.44
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 72 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2013
Mailing Address I-87 South - Thruway Milepost 66		Amount of Each Disbursement this Period 73.22
City Modena	State NY	
Zip Code 12548	Purpose of Disbursement Travel Expense	Transaction ID : VN7ZT9M8C68
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SunTrust Banks, Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 611 Washington Ave		Amount of Each Disbursement this Period 50.00
City Chestertown	State MD	
Zip Code 21620-1219	Purpose of Disbursement Wire Transfer Fee	Transaction ID : VN7ZT9M9461
Candidate Name	Category/ Type 001	
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) c. SunTrust Banks, Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2013
Mailing Address 611 Washington Ave		Amount of Each Disbursement this Period 13.25
City Chestertown	State MD	
Zip Code 21620-1219	Purpose of Disbursement Business Checks	Transaction ID : VN7ZT9M8CE2
Candidate Name	Category/ Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional).....	136.47
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VN7ZT9M9461

Outgoing wire transfer fee

Form/Schedule:

Transaction ID:

**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 74 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Talbot County Democratic Forum		Date of Disbursement MM / DD / YYYY 08 / 09 / 2013
Mailing Address PO Box 66		Amount of Each Disbursement this Period 90.00 Transaction ID : VN7ZT9M8P94
City Easton	State MD	
Zip Code 21601-8900	Purpose of Disbursement Tickets to Unity Dinner	Category/ Type 011
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) B. Target Stores		Date of Disbursement MM / DD / YYYY 08 / 10 / 2013
Mailing Address 28539 Marlboro Ave		Amount of Each Disbursement this Period 6.35 Transaction ID : VN7ZT9M8D45
City Easton	State MD	
Zip Code 21601-2752	Purpose of Disbursement Office Supplies	Category/ Type 006
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) c. Towne Trophies		Date of Disbursement MM / DD / YYYY 08 / 09 / 2013
Mailing Address 353 High St		Amount of Each Disbursement this Period 14.84 Transaction ID : VN7ZT9M8QW4
City Chestertown	State MD	
Zip Code 21620-1309	Purpose of Disbursement Name Badges	Category/ Type 006
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:	

SUBTOTAL of Disbursements This Page (optional).....	111.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Travelers Insurance		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2013
Mailing Address 150 Sawgrass Dr		Amount of Each Disbursement this Period 232.25 Transaction ID : VN7ZT9M89W6
City Rochester	State NY Zip Code 14620-4648	
Purpose of Disbursement Worker's Compensation Insurance		Category/ Type 001
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) B. TruBlu Politics		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 10133 Maplewood Dr		Amount of Each Disbursement this Period 990.40 Transaction ID : VN7ZT9M8WB2
City Ellicott City	State MD Zip Code 21042-1622	
Purpose of Disbursement Fundraising Consulting & Banner Design		Category/ Type 001
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) c. TruBlu Politics		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2013
Mailing Address 10133 Maplewood Dr		Amount of Each Disbursement this Period 1099.00 Transaction ID : VN7ZT9M8SM6
City Ellicott City	State MD Zip Code 21042-1622	
Purpose of Disbursement Website Design Fees		Category/ Type 001
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:		

SUBTOTAL of Disbursements This Page (optional).....	2321.65
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VN7ZT9M89W6

Quarterly payment for worker's compensation insurance.

Form/Schedule: SB17

Transaction ID: VN7ZT9M8WB2

Fundraising consulting, banner design, and printing of banner.

**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 77 OF 95		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Two Tree Restaurant		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 401 Cypress St		Amount of Each Disbursement this Period 28.38 Transaction ID : VN7ZT9MA8F7
City Millington State MD Zip Code 21651	Purpose of Disbursement Travel Expenses Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. United Democratic Women of Maryland		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2013
Mailing Address 4216 Queensbury Rd		Amount of Each Disbursement this Period 20.00 Transaction ID : VN7ZT9M8WM3
City Hyattsville State MD Zip Code 20781-1434	Purpose of Disbursement Tickets to Luncheon Candidate Name Category/Type 011	
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) C. United Parcel Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 861 Washington Ave		Amount of Each Disbursement this Period 43.76 Transaction ID : VN7ZT9M9429
City Chestertown State MD Zip Code 21620-1003	Purpose of Disbursement Postal Services Candidate Name Category/Type 006	
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:	

SUBTOTAL of Disbursements This Page (optional).....	92.14
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 78 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. United Parcel Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2013
Mailing Address 861 Washington Ave		Amount of Each Disbursement this Period 6.00
City Chestertown	State MD	
Zip Code 21620-1003	Purpose of Disbursement Postal Services	Transaction ID : VN7ZT9M8B26
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2013
Mailing Address 104 Spring Ave		Amount of Each Disbursement this Period 92.00
City Chestertown	State MD	
Zip Code 21620-8500	Purpose of Disbursement Postage	Transaction ID : VN7ZT9M8BW9
Candidate Name	001 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) c. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013
Mailing Address 104 Spring Ave		Amount of Each Disbursement this Period 46.00
City Chestertown	State MD	
Zip Code 21620-8500	Purpose of Disbursement Postage	Transaction ID : VN7ZT9M8C43
Candidate Name	006 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:		

SUBTOTAL of Disbursements This Page (optional).....	144.00
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 79 OF 95			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2013
Mailing Address 104 Spring Ave		Amount of Each Disbursement this Period 5.60 Transaction ID : VN7ZT9M8CT6
City Chestertown	State MD	
Zip Code 21620-8500	Purpose of Disbursement Postage	Category/ Type 001
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) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2013
Mailing Address 104 Spring Ave		Amount of Each Disbursement this Period 6.60 Transaction ID : VN7ZT9M8CZ6
City Chestertown	State MD	
Zip Code 21620-8500	Purpose of Disbursement Postage	Category/ Type 001
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) c. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2013
Mailing Address 104 Spring Ave		Amount of Each Disbursement this Period 9.00 Transaction ID : VN7ZT9M8D37
City Chestertown	State MD	
Zip Code 21620-8500	Purpose of Disbursement Postage	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	21.20
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 80 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2013
Mailing Address 104 Spring Ave		Amount of Each Disbursement this Period 8.30
City Chestertown	State MD	
Zip Code 21620-8500	Purpose of Disbursement Postage	Transaction ID : VN7ZT9M8AH2
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2013
Mailing Address 15 Federal Rd		Amount of Each Disbursement this Period 53.60
City Brookfield	State CT	
Zip Code 06804-2505	Purpose of Disbursement Phone Service	Transaction ID : VN7ZT9M8C19
Candidate Name	001 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) c. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2013
Mailing Address 15 Federal Rd		Amount of Each Disbursement this Period 53.60
City Brookfield	State CT	
Zip Code 06804-2505	Purpose of Disbursement Phone Service	Transaction ID : VN7ZT9M8DG0
Candidate Name	001 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:		

SUBTOTAL of Disbursements This Page (optional).....	115.50
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 81 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2013
Mailing Address 15 Federal Rd		Amount of Each Disbursement this Period 53.60
City Brookfield	State CT	
Zip Code 06804-2505	Purpose of Disbursement Phone Service	Transaction ID : VN7ZT9M8B75
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Joseph Volpe		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 11 Kelton Ct		Amount of Each Disbursement this Period 255.00
City Albany	State NY	
Zip Code 12209-1212	Purpose of Disbursement Website Maintenance Fees	Transaction ID : VN7ZT9M8XN3
Candidate Name	001 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) c. Walgreens Stores		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2013
Mailing Address 2440 Centreville Rd		Amount of Each Disbursement this Period 21.68
City Centreville	State MD	
Zip Code 21617-2802	Purpose of Disbursement Office Supplies	Transaction ID : VN7ZT9M8BQ0
Candidate Name	006 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:		

SUBTOTAL of Disbursements This Page (optional).....	330.28
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 82 OF 95			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Walgreens Stores		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2013
Mailing Address 701 Washington Ave		Amount of Each Disbursement this Period 14.77
City Chestertown	State MD	
Zip Code 21620-1001	Purpose of Disbursement Office Supplies	Transaction ID : VN7ZT9M8CR1
Candidate Name	006 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Walgreens Stores		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2013
Mailing Address 701 Washington Ave		Amount of Each Disbursement this Period 17.73
City Chestertown	State MD	
Zip Code 21620-1001	Purpose of Disbursement Office Supplies	Transaction ID : VN7ZT9M8CS8
Candidate Name	006 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) c. Walgreens Stores		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2013
Mailing Address 701 Washington Ave		Amount of Each Disbursement this Period 4.23
City Chestertown	State MD	
Zip Code 21620-1001	Purpose of Disbursement Office Supplies	Transaction ID : VN7ZT9M8DE4
Candidate Name	006 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:		

SUBTOTAL of Disbursements This Page (optional).....	36.73
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 83 OF 95		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Wye Mills BP		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2013
Mailing Address 212 Grange Hall Rd		Amount of Each Disbursement this Period 40.00
City Queenstown	State MD	
Zip Code 21658-1375	Purpose of Disbursement Travel Expense	Transaction ID : VN7ZT9M8DJ6
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	41093.61

**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 84 OF 95
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Chipotle		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2013
Mailing Address 12909 Ocean Gtwy		Amount of Each Disbursement this Period 6.75
City Ocean City	State MD	
Zip Code 21842-9655	Purpose of Disbursement Political Meeting	Transaction ID : VN7ZT9M8BZ3
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Brian Cordova		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2013
Mailing Address 258 Philadelphia Ave		Amount of Each Disbursement this Period 33.91
City Chambersburg	State PA	
Zip Code 17201-1652	Purpose of Disbursement Reimbursement	Transaction ID : VN7ZT9M8M75
Candidate Name	006 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) c. Evergrain Bread Company		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2013
Mailing Address 201 High St		Amount of Each Disbursement this Period 3.03
City Chestertown	State MD	
Zip Code 21620-1517	Purpose of Disbursement Political Meeting	Transaction ID : VN7ZT9M8BE9
Candidate Name	007 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:		

SUBTOTAL of Disbursements This Page (optional).....	43.69
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21

Transaction ID : VN7ZT9M8M75

Reimbursement for purchase of memory card for photo shoot.

Form/Schedule:

Transaction ID:

**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 86 OF 95
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Evergrain Bread Company		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013
Mailing Address 201 High St		Amount of Each Disbursement this Period 6.89
City Chestertown	State MD	
Zip Code 21620-1517	Purpose of Disbursement Political Meeting	Transaction ID : VN7ZT9M8C84
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Evergrain Bread Company		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2013
Mailing Address 201 High St		Amount of Each Disbursement this Period 13.25
City Chestertown	State MD	
Zip Code 21620-1517	Purpose of Disbursement Political Meeting	Transaction ID : VN7ZT9M8DC9
Candidate Name	007 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) c. Evergrain Bread Company		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2013
Mailing Address 201 High St		Amount of Each Disbursement this Period 4.51
City Chestertown	State MD	
Zip Code 21620-1517	Purpose of Disbursement Political Meeting	Transaction ID : VN7ZT9M8AF6
Candidate Name	007 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:		

SUBTOTAL of Disbursements This Page (optional).....	24.65
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 87 OF 95
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Fish Whistle		Date of Disbursement MM / DD / YYYY 07 / 19 / 2013
Mailing Address 98 Cannon St		Amount of Each Disbursement this Period 45.16 Transaction ID : VN7ZT9M8CC6
City Chestertown	State MD	
Zip Code 21620-1582	Purpose of Disbursement Political Meeting	Category/ Type 007
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) B. Fish Whistle		Date of Disbursement MM / DD / YYYY 07 / 22 / 2013
Mailing Address 98 Cannon St		Amount of Each Disbursement this Period 18.55 Transaction ID : VN7ZT9M8CH5
City Chestertown	State MD	
Zip Code 21620-1582	Purpose of Disbursement Political Meeting	Category/ Type 007
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) C. Fish Whistle		Date of Disbursement MM / DD / YYYY 08 / 21 / 2013
Mailing Address 98 Cannon St		Amount of Each Disbursement this Period 24.38 Transaction ID : VN7ZT9M8DB1
City Chestertown	State MD	
Zip Code 21620-1582	Purpose of Disbursement Political Meeting	Category/ Type 007
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:	

SUBTOTAL of Disbursements This Page (optional).....	88.09
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 88 OF 95
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Keauna Gregory		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2013
Mailing Address 1222 Sedgefield Rd		Amount of Each Disbursement this Period 41.31
City Marietta	State GA	
Zip Code 30062-2343	Purpose of Disbursement Reimbursement	Transaction ID : VN7ZT9M8VK2
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Keauna Gregory		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2013
Mailing Address 1222 Sedgefield Rd		Amount of Each Disbursement this Period 121.62
City Marietta	State GA	
Zip Code 30062-2343	Purpose of Disbursement Reimbursement	Transaction ID : VN7ZT9M8VC7
Candidate Name	007 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) C. KFC/Taco Bell Chestertown		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2013
Mailing Address 711 Washington Ave		Amount of Each Disbursement this Period 6.03
City Chestertown	State MD	
Zip Code 21620-1057	Purpose of Disbursement Lunch for Intern	Transaction ID : VN7ZT9M8BV1
Candidate Name	001 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:		

SUBTOTAL of Disbursements This Page (optional).....	168.96
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21

Transaction ID : VN7ZT9M8VC7

Reimbursement for name badges and event tickets.

Form/Schedule:

Transaction ID:

**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 90 OF 95
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. John J LaFerla		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2013
Mailing Address 209 Birch Run Rd		Amount of Each Disbursement this Period 935.94 Transaction ID : VN7ZT9M8X08
City Chestertown	State MD	
Zip Code 21620-1639	Purpose of Disbursement Reimbursement	Category/ Type 006
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) B. Macy's East #0049		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2013
Mailing Address 120 Washington Avenue Ext		Amount of Each Disbursement this Period 18.56 Transaction ID : VN7ZT9M8C92
City Albany	State NY	
Zip Code 12203-5367	Purpose of Disbursement Gift for Speaker	Category/ Type 007
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) C. Matthew's Hallmark #2		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2013
Mailing Address 120 Washington Avenue Ext		Amount of Each Disbursement this Period 4.30 Transaction ID : VN7ZT9M8C76
City Albany	State NY	
Zip Code 12203-5367	Purpose of Disbursement Thank You Card	Category/ Type
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:		

SUBTOTAL of Disbursements This Page (optional).....	958.80
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 91 OF 95
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Gerard Neely		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 2206 Issacs Way		Amount of Each Disbursement this Period 99.33 Transaction ID : VN7ZT9M8WG1
City Forest Hill	State MD	
Zip Code 21050-2650	Purpose of Disbursement Reimbursement	Category/ Type 002
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) B. O'Connor's Irish Pub		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2013
Mailing Address 844 High St		Amount of Each Disbursement this Period 11.55 Transaction ID : VN7ZT9M8DD6
City Chestertown	State MD	
Zip Code 21620-1135	Purpose of Disbursement Political Meeting	Category/ Type 007
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) c. Panera Bread Company		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2013
Mailing Address 1022 Beards Hill Rd		Amount of Each Disbursement this Period 6.98 Transaction ID : VN7ZT9M8AM5
City Aberdeen	State MD	
Zip Code 21001-2291	Purpose of Disbursement Political Meeting	Category/ Type 007
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:	

SUBTOTAL of Disbursements This Page (optional).....	99.33
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21

Transaction ID : VN7ZT9M8WG1

Mileage reimbursement

Form/Schedule:

Transaction ID:

**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 93 OF 95
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. Pasta Plus		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 21356 Rock Hall Ave		Amount of Each Disbursement this Period 19.05
City Rock Hall	State MD	
Zip Code 21661-1511	Purpose of Disbursement Political Meeting	Transaction ID : VN7ZT9M9403
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ruby Tuesday		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2013
Mailing Address 312 E Pulaski Hwy		Amount of Each Disbursement this Period 31.52
City Elkton	State MD	
Zip Code 21921-6435	Purpose of Disbursement Political Meeting	Transaction ID : VN7ZT9M8CV4
Candidate Name	007 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) C. Sitar Indian Cuisine		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2013
Mailing Address 1929 Central Ave		Amount of Each Disbursement this Period 26.98
City Albany	State NY	
Zip Code 12205-4221	Purpose of Disbursement Political Meeting	Transaction ID : VN7ZT9M8CA0
Candidate Name	007 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:		

SUBTOTAL of Disbursements This Page (optional).....	77.55
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 94 OF 95
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LaFerla For Congress

Full Name (Last, First, Middle Initial) A. SunTrust Banks, Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2013
Mailing Address 611 Washington Ave		Amount of Each Disbursement this Period 6.00 Transaction ID : VN7ZT9M8CM9
City Chestertown State MD Zip Code 21620-1219	Purpose of Disbursement Deposit Correction Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SunTrust Banks, Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2013
Mailing Address 611 Washington Ave		Amount of Each Disbursement this Period 50.00 Transaction ID : VN7ZT9M8CQ3
City Chestertown State MD Zip Code 21620-1219	Purpose of Disbursement Deposit Correction Candidate Name Category/Type 001	
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) c. Brendan Young		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2013
Mailing Address 103 Canvas Pl		Amount of Each Disbursement this Period 88.14 Transaction ID : VN7ZT9M8WH9
City Bel Air State MD Zip Code 21015-8611	Purpose of Disbursement Reimbursement Candidate Name Category/Type 002	
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:	

SUBTOTAL of Disbursements This Page (optional).....	144.14
TOTAL This Period (last page this line number only).....	1605.21

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21

Transaction ID : VN7ZT9M8WH9

Mileage reimbursement

Form/Schedule:

Transaction ID: