

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

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Office Use Only

FEC MAIL CENTER
12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT

Example: If typing, type over the lines.

Gerry Dembrowski PAC

ADDRESS (number and street)

21 Cummings Park Drive Suite 208B

Check if different than previously reported. (ACC)

Woburn

MA

01801

2. FEC IDENTIFICATION NUMBER

C 00485284

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MA

07

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

11 M

06 D

2012 Y Y

in the State of

MA

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

General (30G)

Runoff (30R)

Special (30S)

Election on

11 M

06 D

2012 Y Y

in the State of

MA

5. Covering Period

04 M

16 D

2011 Y Y

through

07 M

15 D

2011 Y Y

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

Jess Barnes

Signature of Treasurer

Date

M M

D D

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Gerry Dembrowski PAC

Report Covering the Period: From: **04** M / **16** D / **2011** Y . Y To: **07** M / **15** D / **2011** Y . Y

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))
- (b) Total Contribution Refunds (from Line 20(d))
- (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))

0

0

7. Net Operating Expenditures

- (a) Total Operating Expenditures (from Line 17)
- (b) Total Offsets to Operating Expenditures (from Line 14)
- (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))

0

0

8. Cash on Hand at Close of Reporting Period (from Line 27)

0

9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

For further information contact:

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

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

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DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....		
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committeees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS.....		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	0	0

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	-40,000
25. SUBTOTAL (add Line 23 and Line 24).....	-40,000
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	0
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	-40,000

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

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

NAME OF COMMITTEE (In Full)
Gerry Dembrowski PAC

Full Name (Last, First, Middle Initial)
A. 21 Cummings Park Drive Suite 208B

Mailing Address
Woburn MA 01801
City State Zip Code

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

FEC ID number of contributing federal political committee.
C 00485284

Amount of Each Receipt this Period

Name of Employer
Dembrowski Chiropractic Occupation
Doctor

Receipt For: Primary General
 Other (specify) Election Cycle-to-Date

Full Name (Last, First, Middle Initial)
B. Dembrowski Gerald C

Mailing Address
21 Cummings Park Drive Suite 208B
City State Zip Code
Woburn MA 01801

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

FEC ID number of contributing federal political committee.
C 00485284

Amount of Each Receipt this Period

Name of Employer
Dembrowski Chiropractic Occupation
Doctor

Receipt For: Primary General
 Other (specify) Election Cycle-to-Date

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

Mailing Address
City State Zip Code

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

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) Election Cycle-to-Date

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

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

Amount of Each Receipt this Period

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**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 OF

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

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

NAME OF COMMITTEE (In Full)
Gerry Dembrowski PAC

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

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

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

SUBTOTAL of Disbursements This Page (optional).....	<input type="text"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full)
Gerry Dembrowski PAC

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

Mailing Address

City State ZIP Code

Election:
 Primary
 General
 Other (specify)

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred / /

Date Due / /

Interest Rate % (apr)

Secured: Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)

TOTALS This Period (last page in this line only)

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

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

Supplementary for
 Information found on
 Page of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) Gerry Dembrowski PAC	FEC IDENTIFICATION NUMBER C 00485284
--	--

LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR)
Mailing Address	Date Incurred or Established	
City State Zip Code	Date Due	

A. Has loan been restructured? No Yes If yes, date originally incurred

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

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

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: What is the value of this collateral?
 Does the lender have a perfected security interest in it? No Yes

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

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).
 Date account established: Location of account:
 City, State, Zip:

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

G. COMMITTEE TREASURER
 Typed Name Signature DATE

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

AUTHORIZED REPRESENTATIVE
 Typed Name Signature DATE

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SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)

Gerry Dembrowski PAC

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

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

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

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

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

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

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

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FEC FORM 3Z (File with Form 3)
CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS
 (To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) Gerry Dembrowski PAC	Report Covering Period: From: <input type="text"/> / <input type="text"/> / <input type="text"/> To: <input type="text"/> / <input type="text"/> / <input type="text"/>
---	--

Committee Name	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A Gerry Dembrowski PAC		
B Column Total Last Page Only.....		

	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A						
B						
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A						
B						
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A						
B						
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A						
B						
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A						
B						

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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Other (Specify): Date of Receipt or Postmarked



PREPARER

(3/2005)

8/29/11

DATE PREPARED

11030654781