

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

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FEC MAIL CENTER

1. NAME OF COMMITTEE (In full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 MARTIN LONG FOR CONGRESS

ADDRESS (number and street) 301 MILL ST SUITE 209 ARLINGTON MA 02476- Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C 00548560 3. IS THIS REPORT NEW OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT

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 10/15/2013 in the State of MA (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on in the State of

5. Covering Period 09/26/2013 through 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 MARTIN LONG

Signature of Treasurer [Signature] Date 04/22/2014

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

Table with 8 columns for Office Use Only

FEC FORM 3 (Revised 02/2003)

14031231791

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

MARTIN LONG FOR CONGRESS

Report Covering the Period:

From:

09 / 26 / 2013

To:

09 / 30 / 2013

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))....

, , 0. , 5,985.00

(b) Total Contribution Refunds
(from Line 20(d))

, , 0. , , 0.

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

, , 0. , 5,985.00

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

, , 32.02 , 17,064.42

(b) Total Offsets to Operating
Expenditures (from Line 14)

, , 0. , , 0.

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

, , 32.02 , 17,064.42

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

, 6,491.57

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

, , 0.

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

, 19,494.62

For further information contact:

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

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

14031231792

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

MARTIN LONG FOR CONGRESS

Report Covering the Period: From:

M M I D D I Y Y Y Y

09/26/2013

To:

M M I D D I Y Y Y Y

09/30/2013

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).....

, , 0 .

, 5,700.00

(ii) Unitemized.....

, , 0 .

, 275.00

(iii) TOTAL of contributions from individuals.....

, , 0 .

, 5,975.00

(b) Political Party Committees.....

, , 0 .

, 0 .

(c) Other Political Committees (such as PACs).....

, , 0 .

, 0 .

(d) The Candidate.....

, , 0 .

, 10.00

(e) TOTAL CONTRIBUTIONS (other than loans)

(add Lines 11(a)(ii), (b), (c), and (d))..

, , 0 .

, 5,985.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

, , 0 .

, 0 .

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

, , 0 .

, 15,000.00

(b) All Other Loans.....

, , 0 .

, 0 .

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

, , 0 .

, 15,000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

, , 0 .

, 0 .

15. OTHER RECEIPTS (Dividends, interest, etc.).....

, , 0 .

, 0 .

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....

, , 0 .

, 20,985.00

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**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3 (Revised 02/2008)

Page 4

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....	32.02	17,064.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.	0.
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.	0.
(b) Of All Other Loans.....	0.	0.
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.	0.
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.	0.
(b) Political Party Committees.....	0.	0.
(c) Other Political Committees (such as PACs).....	0.	0.
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.	0.
21. OTHER DISBURSEMENTS.....	0.	0.
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	32.02	17,064.42

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6,523.59
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.
25. SUBTOTAL (add Line 23 and Line 24).....	6,523.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	32.02
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6,491.57

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SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full)
MARTIN LONG FOR CONGRESS

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

Election:
 Primary
 General
 Other (specify) ▾

Mailing Address
30 Mill St. #204

City State ZIP Code
Arlington MA 02476

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4,500.00	0.	4,500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM/DD/YYYY 07/31/2013	MM/DD/YYYY NONE	NONE % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional) ▷ **4,500.00**

TOTALS This Period (last page in this line only) ▷ , , .

Carry outstanding balance only to LINE 2, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14031231795

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

MARTIN LONG FOR CONGRESS

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

LONG, MARTIN

Election:

Primary
 General
 Other (specify) ▾

Mailing Address

30 Mill St. #204

City

Arlington,

State

MA

ZIP Code

02476

Original Amount of Loan

10,500.00

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

10,500.00

TERMS

Date Incurred

MM/DD/YYYY
08/09/2013

Date Due

MM/DD/YYYY
NONE

Interest Rate

NONE

% (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... >

10,500.00

TOTALS This Period (last page in this line only)..... >

15,000.00

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

14031231796

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 1 OF 2

FOR LINE NUMBER: (check only one)

8
18

NAME OF COMMITTEE (in Full)
Martin LONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>Harvard Bookstore</i>	Nature of Debt (Purpose): <i>printed material</i>
Mailing Address <i>1256 MASS AVE.</i>	
City State Zip Code <i>(Cambridge, MA 02138)</i>	

Outstanding Balance Beginning This Period <i>754.80</i>	Amount Incurred This Period <i>0.</i>	Payment This Period <i>0.</i>	Outstanding Balance at Close of This Period <i>754.80</i>
--	--	----------------------------------	--

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>ACME BOOKS BUREAU CO, Inc.</i>	Nature of Debt (Purpose): <i>printed material</i>
Mailing Address <i>80 Cambridge St.</i>	
City State Zip Code <i>CHARLESTOWN, MA 02129-0212</i>	

Outstanding Balance Beginning This Period <i>769.25</i>	Amount Incurred This Period <i>0.</i>	Payment This Period <i>0.</i>	Outstanding Balance at Close of This Period <i>769.25</i>
--	--	----------------------------------	--

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>Prico, Resid</i>	Nature of Debt (Purpose): <i>website maintenance</i>
Mailing Address <i>107 Sharnood St.</i>	
City State Zip Code <i>Roslindale MA 02131</i>	

Outstanding Balance Beginning This Period <i>400.00</i>	Amount Incurred This Period <i>0.</i>	Payment This Period <i>0.</i>	Outstanding Balance at Close of This Period <i>400.00</i>
--	--	----------------------------------	--

1) SUBTOTALS This Period This Page (optional).....	<i>1,924.05</i>
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only).....	

14031231797

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedules for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (in Full)

MARTIN LONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LONG, MARTIN		Nature of Debt (Purpose):
Mailing Address 30 Mill St. #204		
City ARLINGTON, MA	State MA	
Outstanding Balance Beginning This Period 2,570.57		
Amount Incurred This Period 0.	Payment This Period 0.	Outstanding Balance at Close of This Period 2,570.57

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	
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	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	2,570.57
2) TOTALS This Period (last page only)	4,494.62
3) TOTAL OUTSTANDING LOANS from Schedules C (last page only)	15,000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	19,494.62

14031231798

Martin C Long
30 Mill St Unit 204
Arlington, MA 02476

14031231799



7013 2630 0000 5242 7116



1000



20403

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 4/28/14
 PREPARER DATE PREPARED
 (8/2013)

14031231801