FFC I	ND DIS		ECEIPTS EMENTS ommittee	Office	Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT	「 ▼	Example: If typing, type over the lines.	12FE4M5	
	RESS				
ADDRESS (number and street)	209 BIRCH RU	N ROAD			
▼	PO BOX 832				
Check if different than previously reported. (ACC)		VN 		MD 21620	
2. FEC IDENTIFICATION NU	JMBER 🔻	CITY		STATE	ZIP CODE
C C00507335		3. IS THIS	V NEW	AMENDED	STATE ▼ DISTRICT
0 0000/335		REPORT	× NEW (N) OR	(A)	MD 01
 4. TYPE OF REPORT (Choose (a) Quarterly Reports: April 15 Quarterly F July 15 Quarterly R October 15 Quarterly January 31 Year-En Termination Report 	leport (Q1) eport (Q2) ly Report (Q3) d Report (YE)	Election	OST-Election Report for th General (30G)	General (12G) Special (12S)	Runoff (12R) in the State of Special (30S) in the State of
5. Covering Period 04		Y Y Y Y 2013	through 0	6 30 2	2013
I certify that I have examined the Type or Print Name of Treasurer		-	knowledge and belief it is	s true, correct and com	olete.
Signature of Treasurer Nand	y E Harrison		[Electronically Filed]	Date	15 / Y Y Y Y 2013
NOTE: Submission of false, errone	ous, or incomple	te information m	ay subject the person signing	ng this Report to the pen	alties of 2 U.S.C. §437g.
Office Use Only					EC FORM 3 Revised 02/2003)

07/15/2013 17 : 17

PAGE 1 / 40

Image# 13964074801

Γ	FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 40
	/rite or Type Committee Name _AFERLA FOR CONGRESS		
R	eport Covering the Period: From:	04 / D D / Y Y Y Y 01 / 2013 To:	M M / D D / Y Y Y Y 06 / 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))	38147.33	43144.28
	(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))	38147.33	43144.28
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	11560.68	19427.45
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	76.00
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	11560.68	19351.45
8.	Cash on Hand at Close of Reporting Period (from Line 27)	29750.34	
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)	39018.63	

For further information contact:

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

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

Image# 13964074802

Image# 13964074803		
Г	DETAILED SUMMARY PAGE	_
FEC Form 3 (Revised 12/2003)	of Receipts	PAGE 3 / 40
Write or Type Committee Name		
LAFERLA FOR CONGRESS		
Report Covering the Period: From:	04 / D D / Y Y Y Y 01 2013 To:	M M / D D / Y Y Y Y 06 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)	28366.33	31466.33
(ii) Unitemized	9781.00	11517.95
(iii) TOTAL of contributions from individuals	38147.33	42984.28
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) The Candidate	0.00	160.00
(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	38147.33	43144.28
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	76.00
15. OTHER RECEIPTS	0.00	0.00
(Dividends, Interest, etc.)		0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	38147.33	43220.28

of Disbursements PAGE 4 / 40 FEC Form 3 (Revised 02/2003) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 11560.68 19427.45 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 5000.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 5000.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 11560.68 24427.45 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY**

DETAILED SUMMARY PAGE

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7		7		3163.69
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7		7	_	38147.33
25.	SUBTOTAL (add Line 23 and Line 24)		7		7	-	41311.02
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	Γ.	7		7	-	11560.68
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7	_	29750.34

Image# 13964074804

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 OF 40 (check only one) I1a 11b 11c 11d I1a 11b 11c 11d 11d I2 I3a 13b 14 15
				person for the purpose of soliciting contributions be to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS			
<u>А</u> .	Full Name (Last, First, Middle Initial) Fouad Abbas			Date of Receipt
Λ.	Mailing Address 7018 Rock Stream Court			06 04 2013
	City Baltimore	State MD	Zip Code 21209	Transaction ID : SA11AI.6200
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Self	Occupation Physician	I	
	Receipt For: 2014	Election Cy	/cle-to-Date	
	Primary General Other (specify)		1000.00	
В.	Full Name (Last, First, Middle Initial) Ronald Abramson			Date of Receipt
	Mailing Address 1700 K Street NW #300	M M / D D / Y Y Y Y 05 02 2013		
	City Washington	State DC	Zip Code 20006	Transaction ID : SA11AI.6136
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	I	
	Buchanan Ingersoll & Rooney	Attorney		
	Receipt For: 2014	Election Cy	/cle-to-Date	
	Other (specify)		500.00	
с.	Full Name (Last, First, Middle Initial)			Date of Receipt
0.	Mailing Address 522 Lime Landing Rd			M M / D D / Y Y Y Y 04 19 2013
	City Millington	State MD	Zip Code 21651	Transaction ID : SA11AI.6127
	FEC ID number of contributing		21031	
	federal political committee.	С		Amount of Each Receipt this Period
	Name of EmployerOccupationMillington HardwareOwnerReceipt For:2014XPrimaryGeneral		l	1000.00
				_
			/cle-to-Date	
	Other (specify)		1000.00	
s	UBTOTAL of Receipts This Page (optional)	2500.00		
Т	OTAL This Period (last page this line number of	only)		, ,

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 40 (check only one)
	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	LAFERLA FOR CONGRESS Full Name (Last, First, Middle Initial) Myron Arms			
Α.	Mailing Address PO Box 30			Date of Receipt
	City Cecilton	State MD	Zip Code 21913	Transaction ID : SA11AI.6221
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Retired	Occupation Self employ		
	Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date]
В.	Full Name (Last, First, Middle Initial) Joan Bailey Mailing Address 28420 Catalpa Point Rd			Date of Receipt
	City	06 / D D / Y Y Y Y Y 2013		
	Easton	State MD	Zip Code 21601	Transaction ID : SA11AI.6244
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		
	None	Homemake		_
	Receipt For: 2014	Election C	ycle-to-Date	_
	Other (specify)		300.00]
c.	Full Name (Last, First, Middle Initial) Randall Bellows			Date of Receipt
	Mailing Address 6778 Burris Rd	Chata	7:- 0	05 / D D / Y Y Y Y Y 07 2013
	City Rock Hall	State MD	Zip Code 21661	Transaction ID : SA11AI.6096
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Retired Retired Retired		Occupation	ı	300.00
		Retired		
		Election C	ycle-to-Date	
	Primary General Other (specify)		300.00]
s	UBTOTAL of Receipts This Page (optional)			
т	OTAL This Period (last page this line number	, ,		

I

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 40 (check only one)
				person for the purpose of soliciting contributions se to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS			
A.	Full Name (Last, First, Middle Initial) Garrett Bilmire			Date of Receipt
	Mailing Address 4922 Augustine Herman Hwy			04 01 2013
	City	State	Zip Code	Transaction ID : SA11AI.6133
	Earleville	MD	21919	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer APEC	Occupation Sales	1	
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary General Other (specify)		250.00	1
В.	Full Name (Last, First, Middle Initial) Garrett Bilmire	Date of Receipt		
5.	Mailing Address 4922 Augustine Herman Hwy	05 15 2013		
	City Earleville	State MD	Zip Code 21919	Transaction ID : SA11AI.6143
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	APEC	Sales		
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary General Other (specify)		500.00	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
C.	Mailing Address 110 Birch Run Rd			M M / D D / Y Y Y Y
	City	State	Zip Code	04 11 2013
	Chestertown	MD	21620	Transaction ID : SA11AI.6085
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer		Occupation		500.00
	None	Not employ		
	Receipt For: 2014	Election C	ycle-to-Date	_
	Other (specify)		500.00	
s	UBTOTAL of Receipts This Page (optional)			1000.00
Т	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 40 (check only one)
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Sandra Bjork			Date of Receipt
	Mailing Address 110 Birch Run Rd			04 25 2013
	City Chestertown	State MD	Zip Code 21620	Transaction ID : SA11AI.6113
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer None	Occupation Not employ		
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary General Other (specify)		525.00	1
В.	Full Name (Last, First, Middle Initial) Sandra Bjork			Date of Receipt
	Mailing Address 110 Birch Run Rd	06 30 2013		
	City State Zip Code Chestertown MD 21620			Transaction ID : SA11AI.6306
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	None	Not employ		
	Receipt For: 2014	Election C	ycle-to-Date	_
	Other (specify)		625.00]
с.	Full Name (Last, First, Middle Initial) David Bowering			Date of Receipt
5.	Mailing Address 209 Washington Ave			06 30 2013
	City Chestertown	State MD	Zip Code 21620	Transaction ID : SA11AI.6307
	FEC ID number of contributing	_		_
	federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Retired	Occupatior Retired	n	500.00
	Receipt For: 2014		ycle-to-Date	
	Primary General	LIECTION O	ycie-io-dale	
	Other (specify)	L	500.00]
s	UBTOTAL of Receipts This Page (optional)			625.00
Т	OTAL This Period (last page this line number	only)		, ,

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 40 (check only one)
				person for the purpose of soliciting contributions be to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
A.	Full Name (Last, First, Middle Initial) Carol Cayo			Date of Receipt
	Mailing Address 3855 Margits Lane			06 28 2013
	City Trappe	State MD	Zip Code 21673	Transaction ID : SA11AI.6417
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Vertex Inc	Occupation Director		
	Receipt For: 2014 Primary General Other (specify)	Election Cy	vcle-to-Date 250.00	
В.	Full Name (Last, First, Middle Initial) Amina Chaudhry			Date of Receipt
	Mailing Address 31 N. Decker Ave			06 30 Y Y Y Y Y 06 30 2013
	City Baltimore	State MD	Zip Code 21224	Transaction ID : SA11AI.6309
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation Physician		250.00
	Johns Hopkins Receipt For: 2014		vcle-to-Date	_
	Primary General Other (specify)		250.00	
<u></u> с.	Full Name (Last, First, Middle Initial)			Date of Receipt
0.	Mailing Address 6853 Pentridge Court			M M / D D / Y Y Y Y 06 28 2013
	City Chestertown	State MD	Zip Code 21620	Transaction ID : SA11AI.6421
		С		Amount of Each Receipt this Period
		Occupation Information		500.00
	Receipt For: 2014 Primary General Other (specify)		cle-to-Date 500.00	
s	UBTOTAL of Receipts This Page (optional)			1000.00
Г	OTAL This Period (last page this line number o			

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 40 (check only one)
				person for the purpose of soliciting contributions be to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
A.	Full Name (Last, First, Middle Initial) Louis Codispoti			Date of Receipt
	Mailing Address 4772 Sailors Retreat Rd			05 23 2013
	City	State	Zip Code	Transaction ID : SA11AI.6169
	Oxford	MD	21654	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Univ of Maryland	Occupation Oceanogra		
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary General Other (specify)		250.00]
В.	Full Name (Last, First, Middle Initial) Diana Conway			Date of Receipt
υ.	Mailing Address 10600 River Rd	M M / D D / Y Y Y Y 04 22 2013		
	City Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.6090
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	250.00
	None	None		
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary General Other (specify)		250.00	
	Full Name (Last, First, Middle Initial)			Data of Respirat
C.	David Danner Mailing Address 204 S. Hanson St			Date of Receipt
	204 S. Hanson St			06 08 2013
	City	State MD	Zip Code	Transaction ID : SA11AI.6190
	Easton	MD	21601	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer O		1	300.00
	Chesapeake Pathology Associate	Physician		_
	Receipt For: 2014	Election C	ycle-to-Date	
	Other (specify)		300.00	
s	UBTOTAL of Receipts This Page (optional)	800.00		
Т	OTAL This Period (last page this line number of	, ,		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 40 (check only one) Image: Check o
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS			
_	Full Name (Last, First, Middle Initial) Deborah Davis			Data of Pagaint
Α.	Mailing Address 342 Fords Landing Lane			Date of Receipt
	City	State	Zip Code	Transaction ID : SA11AI.6151
	Millington	MD	21651	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Chester River Health	Occupation Physician	1	
	Receipt For: 2014		ycle-to-Date	—
	Primary General Other (specify)		250.00]
В.	Full Name (Last, First, Middle Initial) Susan Delean-Botkin			Date of Receipt
Б.	Mailing Address 202 Third Street			05 29 2013
	City Oxford	State MD	Zip Code 21654	Transaction ID : SA11AI.6199
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	Family Care of Easton	Nurse Pract	titioner	
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary General Other (specify)		300.00]
_	Full Name (Last, First, Middle Initial) Jeffrey Denton			Date of Receipt
C.	Mailing Address 6855 Cookes Hope Rd			06 30 2013
	City	State	Zip Code	Transaction ID : SA11AI.6424
	Easton	MD	21601	_
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	250.00
	River Family Physicians	Physician		
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary General Other (specify)		250.00]
s	UBTOTAL of Receipts This Page (optional)			800.00
	OTAL This Period (last page this line number			

S	SCHEDULE A (FEC Form 3)			FOR LINE NUMBER: PAGE 12 OF 40			
	· · · · · ·		Use separate schedule(s) for each category of the	(check only one)			
IT	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 11d			
_				12 13a 13b 14 15			
				person for the purpose of soliciting contributions be to solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
۲ ۸.	Full Name (Last, First, Middle Initial) Janice Dickson			Date of Receipt			
А.	Mailing Address 215 Birch Run Rd	05 21 2013					
	City	State	Zip Code	Transaction ID : SA11AI.6158			
	Chestertown	MD	21620	Transaction ID . SATTALOTSO			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
	Name of Employer	Occupation	2	250.00			
	Name of Employer Retired	Retired	I				
	Receipt For: 2014		vcle-to-Date	_			
	Primary General	Election C	ycle-to-Date				
	Other (specify)	1	250.00				
			, ,				
_	Full Name (Last, First, Middle Initial)						
В.	Thomas Downs			Date of Receipt			
	Mailing Address 104 Dove Lane	M M / D D / Y Y Y Y					
			05 28 2013				
	City	State	Zip Code	Transaction ID : SA11AI.6191			
	Centreville	MD	21617	_			
	FEC ID number of contributing	С		Amount of Each Receipt this Period			
	federal political committee.	•					
	Name of Employer	Occupation	٦	250.00			
	Self	Dentist					
	Receipt For: 2014	Election C	ycle-to-Date				
	Primary General			1			
	Other (specify)		250.00				
_	Full Name (Last, First, Middle Initial)						
C.	Ms. Carol Duane			Date of Receipt			
•••	Mailing Address 85 Park Rd.			M M / D D / Y Y Y Y			
	City	State	Zip Code	06 03 2013			
	City Chelmsford	MA	01824	Transaction ID : SA11AI.6178			
			01024	_			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
	Name of Employer	Occupation	ı	600.00			
	Next Generation Child Care	Teacher					
	Receipt For: 2014	Election C	ycle-to-Date				
	Primary General			1			
	Other (specify)		600.00				
_							
		1100.00					
s	UBTOTAL of Receipts This Page (optional)						
T	OTAL 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: PAGE 13 OF 40 (check only one) X 11a 11b 11c 11d	
			ay not be sold or used by any	12 13a 13b 14 15 person for the purpose of soliciting contributions	
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS	e name and a	address of any political committe	ee to solicit contributions from such committee.	
۲ <u>ــــــــ</u>	Full Name (Last, First, Middle Initial) Margery Ellsberg			Date of Receipt	
	Mailing Address 303 N. Queen Street			06 29 2013	
	City Chestertown	State MD	Zip Code 21620	Transaction ID : SA11AI.6298	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer Self	Occupation Communica		250.00	
	Receipt For: 2014		ycle-to-Date		
	Primary General Other (specify)		250.00	1	
В.	Full Name (Last, First, Middle Initial) Michael Fadden			Date of Receipt	
ь.	Mailing Address 5648 Mt. Holly Rd	ling Address 5648 Mt. Holly Rd			
	City East New Market	State MD	Zip Code 21631	Transaction ID : SA11AI.6295	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer	Occupation	1	250.00	
	Maryland Healthy Weights LLC Receipt For: 2014	Medical Dire			
	Primary General Other (specify)	Election C	ycle-to-Date 250.00	1	
_	Full Name (Last, First, Middle Initial)			Date of Receipt	
C.	Mailing Address 7681 Woodland Circle			04 11 2013	
	City Easton	State MD	Zip Code 21601	Transaction ID : SA11AI.6125	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer Occupation none none Receipt For: 2014		1	250.00	
			ycle-to-Date		
Primary General Other (specify)			250.00	1	
s	UBTOTAL of Receipts This Page (optional)	750.00			
Т	OTAL This Period (last page this line number	only)			

IT Ar				FOR LINE NUMBER: PAGE 14 OF 40 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only only only only only only only only
	NAME OF COMMITTEE (In Full)		,	
A .	Full Name (Last, First, Middle Initial) Judy Gifford Mailing Address 12246 Locust Grove Rd			Date of Receipt
	City Kennedyville	State MD	Zip Code 21645	Transaction ID : SA11AI.6267
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Self	Occupation Farmer	1	
	Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date 250.00]
В.	Full Name (Last, First, Middle Initial) Francesco Grasso Mailing Address 1 Spring Knoll Court			Date of Receipt
	City	State	Zip Code	05 / 28 / 2013 Transaction ID : SA11AI.6193
	Timonium FEC ID number of contributing federal political committee.	MD C	21093	Amount of Each Receipt this Period
	Name of Employer Self	Occupation Physician	1	1000.00
	Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date]
— c.	Full Name (Last, First, Middle Initial) Lawrence Griffith			Date of Receipt
0.	Mailing Address 802 St. George's Rd			M M / D D / Y Y Y Y 06 27 2013
	City Baltimore	State MD	Zip Code 21210	Transaction ID : SA11AI.6245
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Johns Hopkins	Occupation Physician		250.00
	Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date 250.00]
5	UBTOTAL of Receipts This Page (optional)			
1	OTAL This Period (last page this line number	only)		

ITEN	IEDULE A (FEC Form 3) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 OF 40 (check only one)
or for				person for the purpose of soliciting contributions be to solicit contributions from such committee.
A. $\frac{N}{Ma}$	II Name (Last, First, Middle Initial) Ir David A Grimes ailing Address 7207 Grouper Court ty filmington C ID number of contributing deral political committee. ume of Employer	State NC C	Zip Code 28409	Date of Receipt
	hiversity of North Carolina acceipt For: 2014 Primary General Other (specify)	Physician Election Cy	ycle-to-Date 1000.00	
B. $\frac{H}{Ma}$		State	Zip Code	Date of Receipt
FE fec Na Re	Aston C ID number of contributing deral political committee. Trired Cecipt For: 2014 Cecipt For: 2014 Cecipt For: 2014 Cecipt (specify) Cother (specify)	MD C Occupation Retired Election Cy	21601	Amount of Each Receipt this Period
ر م	II Name (Last, First, Middle Initial) ames Hendry ailing Address 449 Heron Point	State	Zip Code	Date of Receipt
C FE fec Na Re	hestertown C ID number of contributing deral political committee. ame of Employer etired ceipt For: 2014 Primary General Other (specify)	MD C Occupation Economist Election Cy	21620	Amount of Each Receipt this Period
	TOTAL of Receipts This Page (optional)			- 1750.00

IT Ar				FOR LINE NUMBER: PAGE 16 OF 40 (check only one) Image: Additional state of the state o
	NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS	e name and a	address of any political committee	
A .	A. Full Name (Last, First, Middle Initial) Mailing Address 14006 Huyettt Lane		Zip Code	Date of Receipt
	Galena	MD	21635	Transaction ID : SA11AI.6239
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Retired	Occupation Retired	1	
	Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date 500.00	
В.	Full Name (Last, First, Middle Initial) Shirley Hunt			Date of Receipt
	Mailing Address 111 N. Queen Street	01-11-	7.0.1	M M / D D / Y Y Y Y 06 26 2013
	City Chestertown	State MD	Zip Code 21620	Transaction ID : SA11AI.6280
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		
	Self Receipt For: 2014		ycle-to-Date	
	Primary General Other (specify)		700.00	
с.	Full Name (Last, First, Middle Initial)			Date of Receipt
0.	Mailing Address PO Box 69			04 26 2013
	City Royal Oak	State MD	Zip Code 21662	Transaction ID : SA11AI.6134
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer None	Occupation Retired	1	1000.00
	Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date 1000.00	
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			2200.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 17 OF 40 (check only one) X 11a 11b 11c 11d	
		Detailed Summary Page	X 11a 11b 11c 11d 12 13a 13b 14 15		
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
Α.	Full Name (Last, First, Middle Initial) Charles Jolly			Date of Receipt	
	Mailing Address 13842 Gregg Neck		7. 0. 1	06 / Y Y Y Y 2013	
	City Galena	State MD	Zip Code 21635	Transaction ID : SA11AI.6420	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer Baker, Donelso, Bearman, Caldw	Occupation Attorney	1	250.00	
	Receipt For: 2014		ycle-to-Date		
	Primary General Other (specify)		, 250.00		
В.	Full Name (Last, First, Middle Initial) Dr. Kevin Karpowicz			Date of Receipt	
υ.	Mailing Address 6923 Hagy Road			M M / D D / Y Y Y Y 06 27 2013	
	City Rock Hall	State MD	Zip Code 21661	Transaction ID : SA11AI.6289	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer	Occupation	1	250.00	
	Johns Hopkins Comm Physicians	Physician			
	Receipt For: 2014	Election C	ycle-to-Date		
	Primary General Other (specify)		250.00		
— с.	Full Name (Last, First, Middle Initial) Diane Kilduff			Date of Receipt	
•.	Mailing Address 4671 Ferry Neck Rd			06 14 2013	
	City	State	Zip Code	Transaction ID : SA11AI.6223	
	Royal Oak	MD	21662		
	FEC ID number of contributing federal political committee. Name of Employer Occupation Retired Retired			Amount of Each Receipt this Period	
			1		
Receipt For: 2014 Election C Primary General Other (specify) Image: Comparison of the c			250.00		
s	UBTOTAL of Receipts This Page (optional)			750.00	
Т	OTAL This Period (last page this line number	only)			

IT Ar				FOR LINE NUMBER: PAGE 18 OF 40 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Im
or	NAME OF COMMITTEE (In Full)	name and a	address of any political committe	e to solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Mr. Sal LaFerla Mailing Address 52004 Florinada Bay City Boynton Beach FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: 2014 Y Other (specify)	State FL Occupation Retired Election C	Zip Code 33436	Date of Receipt 06 29 2013 Transaction ID : SA11AI.6425 Amount of Each Receipt this Period 1000.00
В.	Full Name (Last, First, Middle Initial) Linda Marshall Mailing Address 27 Gina Lane City Elkton	State MD	Zip Code 21921	Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer Retired - General Motors Receipt For: 2014 Primary General Other (specify)	C Occupation Retired Election C	n ycle-to-Date , 316.33	Amount of Each Receipt this Period 291.33 In-kind - office supplies to print materials and signs
c.	Full Name (Last, First, Middle Initial) Noah McCormack Mailing Address 983 Memorial Drive #402 City Cambridge FEC ID number of contributing federal political committee.	State MA	Zip Code 02138	Date of Receipt
Г	Name of Employer none Receipt For: 2014 Primary General Other (specify)	Occupation none Election C	ycle-to-Date	250.00
	SUBTOTAL of Receipts This Page (optional)			1541.33

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 OF 40 (check only one)
				person for the purpose of soliciting contributions be to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Frances Miller			Date of Receipt
	Mailing Address 221 Birch Run Rd			06 10 2013
	City	State	Zip Code	Transaction ID : SA11AI.6187
	Chestertown	MD	21620	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Retired	Occupation Retired		2600.00
	Receipt For: 2014	Election Cy	/cle-to-Date	
	Primary General Other (specify)		2600.00	
В.	Full Name (Last, First, Middle Initial) Russell Moy			Date of Receipt
	Aailing Address 1103 Walnutwood Rd			06 08 2013
	City Hunt Valley	State MD	Zip Code 21030	Transaction ID : SA11AI.6208
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		
	State of Maryland	Physician		
	Receipt For: 2014	Election Cy	/cle-to-Date	
	Primary General Other (specify)		500.00	
<u>с.</u>	Full Name (Last, First, Middle Initial)			Date of Receipt
U.	Mailing Address PO Box 346			05 25 2013
	City	State MD	Zip Code	Transaction ID : SA11AI.6152
	Upper Marlboro		20773	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of EmployerOccupationAmerican Radiology AssociatesRadiologistReceipt For:2014XPrimaryGeneral			1000.00
			/cle-to-Date	_
	Other (specify)	1000.00		
s	UBTOTAL of Receipts This Page (optional)	4100.00		
Т	OTAL This Period (last page this line number o	only)		, ,

Ary information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee to solicit contributions from such contributions from such committee to solicit contributions from suc		CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Statomonto m	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 OF 40 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check onl
A Mailing Address 121 Smith Ave City State Zip Code City MD 21157 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Receipt For: 2014 Election Cycle-to-Date Amount of Each Receipt Mailing Address 210 David Drive State Zip Code Mailing Address 210 David Drive State Zip Code Mailing Address 210 David Drive C Amount of Each Receipt City Chestentown State Zip Code Mailing Address 210 David Drive C Amount of Each Receipt City Chestentown State Zip Code Mailing Address 710 David Drive C Amount of Each Receipt this Period Private Practice Physician Election Cycle-to-Date Private Practice Physician Election Cycle-to-Date Private Practice MD 21620 Receipt For: 2014 Election Cycle-to-Date Date of Receipt Mailing Address 7:44 Jeffreys Way C State Zip Code Mailing Address 7:44 Jeffreys Way C State Zip Code	or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
Westminater MD 21157 FEC: D number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2014 City Election Cycle-to-Date Mailing Address 210 David Drive C City State Cher (specify) Date of Receipt this Period Receipt For: 2014 C Pinary C Private Practice Physician Private Practice Physician Private Practice Physician Pinary General City State City Cocupation Private Practice Physician Preceipt For: 2014 Election Cycle-to-Date Primary General City State State Zip Code Mailing Address 7444 Jeffreys Way City City State Baston MD 21601 State FEC ID number of contributing federal political committee. Primary General City State Primary General City State Primary General City State Primary Ge	Α.	A Frances C Nyce			M M / D D / Y Y Y Y
rederal political committee. C Name of Employer Retired Occupation Retired 250.00 Full Name (Last, First, Middle Initial) Election Cycle-to-Date Date of Receipt Mailing Address 210 David Drive C 222 / 2013 City Chestertown MD 21620 FEC ID number of contributing federal political committee. Occupation Physician Date of Receipt Receipt For: 2014 Cocupation Physician Election Cycle-to-Date Monunt of Each Receipt this Period Receipt For: 2014 Cocupation Physician Election Cycle-to-Date Monunt of Each Receipt this Period City City City City City City Set for: 2014 General Other (specify) Occupation Physician Date of Receipt Full Name (Last, First, Middle Initial) City Easton Election Cycle-to-Date Date of Receipt City Easton MD 21601 Primary FEC ID number of contributing federal political committee. C Monunt of Each Receipt this Period Name of Employer Self Monunt of Each Receipt this Period Monunt of Each Receipt this Period Primary General Occupation Physician Z50.00 Monunt of Each Receipt this Period Primary General				•	Transaction ID : SA11AI.6179
Name of Employer Occupation Retired Retired Primary General Other (specify) Election Cycle-to-Date Full Name (Last, First, Middle Initial) B. Katherine Pagano Date of Receipt Mailing Address 210 David Drive C City State Zip Code Chestertown MD 21620 FECI D number of contributing C Amount of Each Receipt this Period Receipt For: 2014 General Election Cycle-to-Date Private Practice Physician Date of Receipt Receipt For: 2014 General C Date of Receipt City State Zip Code Transaction ID : SA11AL6423 Receipt For: 2014 General C Mol 1 2601 FEC ID number of contributing federal political committee. C Mount of Each Receipt this Period Name of Employer Occupation Physician		0	С		
Primary General Chter (specify) 350.00 Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 210 David Drive 05 City State Zip Code Chterstown State Zip Code PEC ID number of contributing federal political committee. C Mailing Address 210 David Drive Name of Employer Occupation Physician Primary General City 250.00 Full Name (Last, First, Middle Initial) Election Cycle-to-Date Date of Receipt Primary General City 250.00 Full Name (Last, First, Middle Initial) C Date of Receipt City State Zip Code Easton MD ZipCode Easton MD ZipCode Set Mailing Address 7444 Jeffreys Way City City State Zip Code Easton MD ZibOI FEC ID number of contributing federal political committee. C Name of Employer Occupation Physician Election Cycle-to-Date			· ·		
B. Katherine Pagano Mailing Address 210 David Drive Date of Receipt City State Zlp Code Chestertown MD 21620 FEC ID number of contributing federal political committee. Occupation Private Practice Physician Receipt For: 2014 Election Cycle-to-Date Other (specify) Election Cycle-to-Date FUI Name (Last, First, Middle Initial) C C. Brendon Paltoo Mailing Address 7444 Jeffreys Way Date of Receipt City State Zlp Code Easton MD 21601 FEC ID number of contributing federal political committee. C Name of Employer Occupation MD 21601 FEC ID number of contributing federal political committee. C Name of Employer Occupation Physician Amount of Each Receipt this Period Receipt For: 2014 Election Cycle-to-Date 250.00 Primary General Other (specify) C 250.00		Primary General	Election Cy		
City State Zip Code Chestertown MD 21620 FEC ID number of contributing federal political committee. C Transaction ID : SA11AL.6146 Name of Employer Occupation Physician Private Practice Physician Election Cycle-to-Date Private Practice Physician Election Cycle-to-Date Viter (specify) Election Cycle-to-Date Date of Receipt City State Zip Code Easton MD 21601 FEC ID number of contributing federal political committee. C Date of Receipt Oity State Zip Code Easton MD 21601 FEC ID number of contributing federal political committee. C Name of Employer Occupation Self Physician Primary General Other (specify) Election Cycle-to-Date Primary General Other (specify) Election Cycle-to-Date Primary General Other (specify) Election Cycle-to-Date Primary General <td< th=""><th>в.</th><th>Katherine Pagano</th><th></th><th></th><th></th></td<>	в.	Katherine Pagano			
Chestertown MD 21620 Transaction ID : SATTAL 6146 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer Occupation Physician Private Practice Physician Election Cycle-to-Date Primary General 250.00 Other (specify) Election Cycle-to-Date Date of Receipt Receipt For: 2014 Election Cycle-to-Date Mode Mailing Address 7444 Jeffreys Way City State Zip Code Easton MD 21601 Transaction ID : SATTAL 6423 FEC ID number of contributing federal political committee. C Mode 30 / 2013 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer Occupation Physician Amount of Each Receipt this Period Receipt For: 2014 Election Cycle-to-Date 250.00 Amount of Each Receipt this Period Memory Other (specify) Election Cycle-to-Date 750.00 750.00			Ctoto	Zin Code	
federal political committee. C Amount of Each Receipt this Period Name of Employer Occupation Physician Private Practice Physician Election Cycle-to-Date Primary General 250.00 Other (specify) Election Cycle-to-Date Date of Receipt City State Zip Code Easton MD 21601 FEC ID number of contributing federal political committee. Occupation Name of Employer Occupation Physician Election Cycle-to-Date Primary General Other (specify) C Name of Employer Occupation Physician Election Cycle-to-Date Primary General Other (specify) Election Cycle-to-Date Primary General Other (specify) Z50.00		-		•	Transaction ID : SA11AI.6146
Name of Employer Occupation Private Practice Physician Receipt For: 2014 Election Cycle-to-Date Primary General Other (specify) 250.00 Full Name (Last, First, Middle Initial) Date of Receipt C. Brendon Paltoo Mailing Address 7444 Jeffreys Way Date of Receipt City State Zip Code Easton MD 21601 FEC ID number of contributing C Amount of Each Receipt this Period Name of Employer Occupation 250.00 Name of Employer Occupation 250.00 Receipt For: 2014 Election Cycle-to-Date 250.00 Primary General 250.00 750.00		0	С		
Receipt For: 2014 Election Cycle-to-Date Primary General Other (specify) 250.00 Full Name (Last, First, Middle Initial) Date of Receipt C. Brendon Paltoo Mailing Address 7444 Jeffreys Way City State Zip Code Easton MD 21601 FEC ID number of contributing federal political committee. C Name of Employer Occupation Physician Receipt For: 2014 Election Cycle-to-Date Primary General Other (specify) Election Cycle-to-Date Primary General Other (specify) 250.00		Name of Employer		I	250.00
Primary General Other (specify) 250.00 Full Name (Last, First, Middle Initial) Date of Receipt C. Brendon Paltoo Mailing Address 7444 Jeffreys Way Date of Receipt City State Zip Code Easton MD 21601 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 Primary General Other (specify) 250.00					
C. Brendon Paltoo Date of Receipt Mailing Address 7444 Jeffreys Way City State Zip Code Easton MD 21601 Transaction ID : SA11AI.6423 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer Occupation Physician 250.00 Receipt For: 2014 Election Cycle-to-Date 250.00 Other (specify) Election Cycle-to-Date 750.00		Primary General			
Mailing Address 7444 Jeffreys Way City State Zip Code Easton MD 21601 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer Self Occupation Physician Election Cycle-to-Date 250.00 Primary General 250.00 750.00	<u>с</u>	Brendon Paltoo			Date of Receipt
Easton MD 21601 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer Occupation Physician Election Cycle-to-Date 250.00 Self Primary Other (specify) General Other (specify) 250.00	•.	Mailing Address 7444 Jeffreys Way			
federal political committee. C Amount of Each Receipt this Period Name of Employer Occupation 250.00 Self Physician Election Cycle-to-Date Primary General 250.00 Other (specify) 250.00 750.00				•	Transaction ID : SA11AI.6423
Self Physician Receipt For: 2014 Election Cycle-to-Date Other (specify) 250.00		0	С		
Primary General Other (specify) 250.00	SelfPhysicianReceipt For:2014PrimaryGeneral				
750.00			Election Cy		
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)	F				750.00

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 OF 40 (check only one) (check only one) </th
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Michael Peimer			Date of Receipt
	Mailing Address 8774 Orchard Dr			06 29 _2013 _
	City Chestertown	State MD	Zip Code 21620	Transaction ID : SA11AI.6303
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
	Name of Employer Self	Occupation Physician	1	
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary General Other (specify)		250.00	1
В.	Full Name (Last, First, Middle Initial) Dr Melvin Rapelyea			Date of Receipt
	Mailing Address 17 Bayside Blvd	M M / D D / Y Y Y Y 04 11 2013		
	City Betterton	State MD	Zip Code 21610	Transaction ID : SA11AI.6082
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	500.00
	Self	Physician		
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary General Other (specify)		500.00]
<u>с</u> .	Full Name (Last, First, Middle Initial) Stanley Salett			Date of Receipt
•.	Mailing Address 6860 Pentridge Ct			06 27 2013
	City	State	Zip Code	Transaction ID : SA11AI.6247
	Chestertown	MD	21620	
FEC ID number of contributing federal political committee.		С		Amount of Each Receipt this Period
			ו	500.00
Receipt For: 2014 Election		Consultant		
		Election C	ycle-to-Date	
			500.00	1
s	UBTOTAL of Receipts This Page (optional)	1250.00		
Т	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 OF 40 (check only one) Image: Check only one in the image: Check on in
			ay not be sold or used by any	12 13a 13b 14 15 person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS			
۲ ۸.	Full Name (Last, First, Middle Initial) Marty Saulenas			Date of Receipt
	Mailing Address 22681 Bella Rita Circle			06 19 2013
	City Boca Raton	State FL	Zip Code 33433	Transaction ID : SA11AI.6235
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Sunbeam	Occupation not supplied		
	Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date 2600.00]
В.	Full Name (Last, First, Middle Initial) Lawrence Schroth Jr			Date of Receipt
D.	Mailing Address 213 Radcliffe Dr	M M / D D / Y Y Y Y 06 19 2013		
	City Chestertown	State MD	Zip Code 21620	Transaction ID : SA11AI.6236
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	250.00
	None Receipt For: 2014	Not employ		
	Primary General Other (specify)		ycle-to-Date 250.00]
— с.	Full Name (Last, First, Middle Initial) Mark C Stover			Date of Receipt
0.	Mailing Address 4712 Falcon St			04 22 2013
	City Rockville	State MD	Zip Code 20853	Transaction ID : SA11AI.6088
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Self	Occupation Consultant		500.00
	Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date 500.00	
s	UBTOTAL of Receipts This Page (optional)			
_T	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	d Statements m	Use separate schedule(s) for each category of the Detailed Summary Page nay not be sold or used by any	FOR LINE NUMBER: PAGE 23 OF 40 (check only one) (check only one) 11c 11d 11d 11a 11b 11c 11d 11d 12 13a 13b 14 15 person for the purpose of soliciting contributions
			ee to solicit contributions from such committee.
A. Full Name (Last, First, Middle Initial) Mailing Address 24046 Macs Lane			Date of Receipt
City Worton	State MD	Zip Code 21678	Transaction ID : SA11AI.6126
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
Name of Employer None Receipt For: 2014 Primary General Other (specify)	Occupation Retired Election Cy	ycle-to-Date	500.00
B. Full Name (Last, First, Middle Initial) Mailing Address 63 French Rd			Date of Receipt
City Gilmantown	State NH	Zip Code 03237	06 22 2013 Transaction ID : SA11AI.6271
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period	
Name of Employer None	Occupation none	1	
Receipt For: 2014 Primary General Other (specify)	Election Cy	ycle-to-Date 250.00]
Full Name (Last, First, Middle Initial) C. Richard Warren			Date of Receipt
Mailing Address 5317 Sixty Foot Rd			M M / D D / Y Y Y Y 05 09 2013
City Parsonburg	State MD	Zip Code 21849	Transaction ID : SA11AI.6102
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer none Receipt For: 2014	Occupation not employ	ed	
Primary General Other (specify)		ycle-to-Date 250.00]
SUBTOTAL of Receipts This Page (optional).			- 1000.00

I Т	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 OF 40 (check only one) Image: Arrow of the second
				person for the purpose of soliciting contributions be to solicit contributions from such committee.
A. Full Name (Last, First, Middle Initial) Adam Weinstein Mailing Address 411 Wallman Way City State Stevensville MD		Zip Code 21666	Date of Receipt 05 Transaction ID : SA11AI.6197	
	FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2014 Primary General Other (specify)	C Occupation Physician Election C	ycle-to-Date	Amount of Each Receipt this Period
в.	B. Full Name (Last, First, Middle Initial) Mailing Address 113 Manor Ave		Zip Code	Date of Receipt
	Chestertown FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2014 Primary General Other (specify)	MD C Occupation Physician Election C	11620 1 ycle-to-Date 250.00	Amount of Each Receipt this Period
C.	Full Name (Last, First, Middle Initial) C. Mailing Address City State		Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	Occupation		Amount of Each Receipt this Period
	UBTOTAL of Receipts This Page (optional)			28366.33

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	/ of the	DR LINE NUMBER: PAGE 25 OF 40 heck only one) Image: Constraint of the second secon			
	Any information copied from such Reports and Statements may not be sold or u or for commercial purposes, other than using the name and address of any politic NAME OF COMMITTEE (In Full)						
Α.	Full Name (Last, First, Middle Initial) Keauna Gregory Mailing Address 3100 Spring Hill Pkwy SE # B			Date of Disbursement			
	City State Smyrna GA Purpose of Disbursement Campaign managment services Candidate Name LAFERLA FOR CONGRESS Office Sought: House Disbursement For: Senate X Primary	Zip Code 30080 : 2014 General	001 Category/ Type	Amount of Each Disbursement this Period 660.00 Transaction ID : SB17.6363			
В.	State: MD District: 01 Full Name (Last, First, Middle Initial)			Date of Disbursement			
	City State Smyrna GA Purpose of Disbursement Campaign managment services GA Candidate Name LAFERLA FOR CONGRESS Office Sought: House Disbursement For: Disbursement For:	Zip Code 30080	001 Category/ Type	Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.6377			
_	Senate Primary President Other (s) State: MD District: 01 Full Name (Last, First, Middle Initial) Keauna Gregory			Date of Disbursement			
U.	Mailing Address 3100 Spring Hill Pkwy SE # B City State Zip	General	001 Category/ Type	Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.6385			
s	UBTOTAL of Disbursements This Page (optional)			4660.00			
Т	OTAL This Period (last page this line number only)						

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	/ of the	DR LINE NUMBER: PAGE 26 OF 40 heck only one) X 17 18 19a 19b 20a 20b 20c 21			
	Any information copied from such Reports and Statements may not be sold or used or for commercial purposes, other than using the name and address of any political of NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS						
Α.	Full Name (Last, First, Middle Initial) Keauna Gregory Mailing Address 3100 Spring Hill Pkwy SE			Date of Disbursement			
	# B City State Smyrna GA Purpose of Disbursement Reimbursements see memo	Zip Code 30080	001	Amount of Each Disbursement this Period 247.96 Transaction ID : SB17.6391			
	Candidate Name LAFERLA FOR CONGRESS Office Sought: Senate President State: MD District: 01	General	Category/ Type				
B.	State: MD District: 01 Full Name (Last, First, Middle Initial) Mr. Lawrence LaFerla Mailing Address 83 Montgomery Street		Date of Disbursement				
	City State Boston MA Purpose of Disbursement website maintenance MA Candidate Name LAFERLA FOR CONGRESS Office Sought: X House Disbursement For:	Zip Code 02116	004 Category/ Type	Amount of Each Disbursement this Period 645.00 Transaction ID : SB17.6416			
	Senate Senate President Other (s) State: MD District: 01 Full Name (Last, First, Middle Initial)						
C.	Mailing Address 83 Montgomery Street			Date of Disbursement			
	City State Zip Boston MA 02 Purpose of Disbursement Website maintenance	004	Amount of Each Disbursement this Period 1222.50 Transaction ID : SB17.6365				
	Candidate Name LAFERLA FOR CONGRESS Office Sought: House Senate President State: MD District: 01	General	Category/ Type				
	State: MD District: 01 SUBTOTAL of Disbursements This Page (optional) 2115.46						
1 f	OTAL This Period (last page this line number only)						

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate sch for each categor Detailed Summar	y of the	OR LINE NUMBER: PAGE 27 OF 40 check only one) X 17 18 19a 19b 20a 20b 20c 21			
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full)			person for the purpose of soliciting contributions			
	LAFERLA FOR CONGRESS Full Name (Last, First, Middle Initial)						
Α.	Main Street Business Solutions Inc.			Date of Disbursement			
	Mailing Address 102 Chester Village			04 09 2013			
	City State Chester MD	Zip Code 21619		Amount of Each Disbursement this Period			
	Purpose of Disbursement Compliance consultant Candidate Name		001	Transaction ID : SB17.6340			
	LAFERLA FOR CONGRESS	2014	Category/ Type				
	Senate Primary President Other (s	General					
	Full Name (Last, First, Middle Initial)						
В.	Linda Marshall			Date of Disbursement			
	Mailing Address 27 Gina Lane	7: 0 1		05 30 2013			
	City State Elkton MD	Zip Code 21921		Amount of Each Disbursement this Period			
	Purpose of Disbursement In-kind - office supplies to print materials and signs			291.33 Transaction ID : SB17.6429			
	Candidate Name		Category/ Type				
	Office Sought: House Disbursement For: Senate President Other (sports)	General					
	State: District: Full Name (Last, First, Middle Initial)						
C.	Pay Pal			Date of Disbursement			
	Mailing Address PO Box 45950			06 30 2013			
		o Code 3145		Amount of Each Disbursement this Period			
	Purpose of Disbursement payment processing fees for the quarter		003	445.53			
	Candidate Name LAFERLA FOR CONGRESS		Category/ Type				
	Office Sought: House Disbursement For: Senate President Other (s) State: MD District: 01	General					
s	UBTOTAL of Disbursements This Page (optional)			1321.21			
TOTAL This Period (last page this line number only)							

ITEMIZED DISBURSEMENTS		Use separate sch for each categor Detailed Summar	y of the	OR LINE NUMBER: PAGE 28 OF 40 wheck only one) Image: Constraint of the second seco			
	Any information copied from such Reports and Statements may not be sold or or for commercial purposes, other than using the name and address of any pol NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS						
Α.	Full Name (Last, First, Middle Initial) Salsa Labs Mailing Address PO Box 674533			Date of Disbursement			
	City State Detroit MI Purpose of Disbursement Website	Zip Code 48267	004	Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.6362			
	Candidate Name LAFERLA FOR CONGRESS Office Sought: Senate President State: MD District: 01	General	Category/ Type				
в.	Full Name (Last, First, Middle Initial)			Date of Disbursement			
	City State Millington MD Purpose of Disbursement travel Candidate Name Candidate Name LAFERLA FOR CONGRESS	Zip Code 21651	002 Category/ Type	Amount of Each Disbursement this Period 75.79 Transaction ID : SB17.6361			
	Office Sought: X House Disbursement Formation Senate President X Primary State: MD District: 01	General					
C.	Full Name (Last, First, Middle Initial) Shell Oil Mailing Address 10645 Howard Johnson Rd			Date of Disbursement			
		p Code 1651	002	Amount of Each Disbursement this Period 64.89 Transaction ID : SB17.6408			
	Candidate Name LAFERLA FOR CONGRESS Office Sought: House Senate Disbursement Form President Other (s State: MD District: 01	General	Category/ Type				
s	UBTOTAL of Disbursements This Page (optional)			190.68			
Т	OTAL This Period (last page this line number only)	L , ,					

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate scl for each categor Detailed Summar	/ of the	FOR LINE NUMBER: PAGE 29 OF 40 (check only one) (check only one) </th			
	Any information copied from such Reports and Statements may not be sold or or for commercial purposes, other than using the name and address of any po- NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS						
Α.	Full Name (Last, First, Middle Initial) Tru Blu Politics Mailing Address 5570 Sterrett Place	Date of Disbursement 04 26 2013					
	Suite 300 City State Columbia MD Purpose of Disbursement Common Encare consultant	Zip Code 21044		Amount of Each Disbursement this Period 615.41			
	Campaign Finance consultant Candidate Name LAFERLA FOR CONGRESS Office Sought: X House Disbursement For	: 2014	003 Category/ Type	Transaction ID : SB17.6351			
	State: MD District: 01 Full Name (Last, First, Middle Initial)						
В.	Joseph Volpe Mailing Address 11 Kelton Court			Date of Disbursement			
	City State Zip Code Albany NY 12209 Purpose of Disbursement website maintenance Image: Code			Amount of Each Disbursement this Period 315.00			
	Candidate Name LAFERLA FOR CONGRESS Office Sought: X House Disbursement For	: 2014	Category/ Type	Transaction ID : SB17.6339			
	State: MD District: 01						
C.	Full Name (Last, First, Middle Initial) Joseph Volpe Mailing Address 11 Kelton Court			Date of Disbursement			
	City State Zi Albany NY 1	p Code 2209		Amount of Each Disbursement this Period			
	Purpose of Disbursement Website maintenance Candidate Name LAFERLA FOR CONGRESS Office Sought: X House Disbursement For: 2014			157.50 Transaction ID : SB17.6353			
_	State: MD District: 01						
	UBTOTAL of Disbursements This Page (optional)	1087.91					

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate sch for each categor Detailed Summar	y of the y Page	OR LINE NUMBER: PAGE 30 OF 40 check only one) X 17 18 19a 19b 20a 20b 20c 21			
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS						
A.	Full Name (Last, First, Middle Initial) Young Democrats of Maryland		Date of Disbursement				
	Mailing Address PO Box 853			06 18 2013			
	City State Annapolis MD	Zip Code 21404		Amount of Each Disbursement this Period			
	Purpose of Disbursement Event tickets		007	250.00 Transaction ID : SB17.6400			
	Candidate Name LAFERLA FOR CONGRESS		Category/ Type	,			
	Office Sought: House Disbursement For Senate President Other (s State: MD District: 01	General					
в.	Full Name (Last, First, Middle Initial)			Date of Disbursement			
	Mailing Address			M M / D D / Y Y Y Y			
	City State	Zip Code		Amount of Each Disbursement this Period			
	Purpose of Disbursement		· · ·				
	Candidate Name		Category/ Type	*			
	Office Sought: House Disbursement For Senate President Other (s	General					
	State: District: Full Name (Last, First, Middle Initial)						
C.	Mailing Address			Date of Disbursement			
	City State Zi	p Code		Amount of Each Disbursement this Period			
	Purpose of Disbursement						
	Candidate Name		Category/ Type	1			
	Office Sought: House Disbursement For Senate President Other (s State: District:	General					
	LIPTOTAL of Diphuroperte This Docs (actions)			250.00			
	UBTOTAL of Disbursements This Page (optional)			9625.26			

nage# 13964074831						
CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)			
AME OF COMMITTEE (In Full) AFERLA FOR CONGRESS		Transactio	on ID : SC/10.4175			
LOAN SOURCE Full Name (Last, First, Mic Dr. JOHN JAMES LAFERLA	ddle Initial)		Election: 2012 X Primary General			
Mailing Address 209 BIRCH RUN ROAD			Other (specify)			
City	State ZIP Co	de				
CHESTERTOWN	MD 21620					
Original Amount of Loan	Cumulative Payment To		ce Outstanding at Close of This Period			
2500.00		0.00	2500.00			
TERMS Date Incurred	Date Due	Interest Rate	Secured:			
M 12 ^M / D 30 ^D / Y 2011 Y	M M / D D / Y	11/11/12 ^Y 0.00	₩ (apr) . Yes No			
List All Endorsers or Guarantors (if any) t	o 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:	p 1 1 p 1 1 m 1			
4. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:				
CUBTOTALS This Period This Page (optional).	y)		2500.00			

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: SC/10 Transaction ID : SC/10.4175

(Current loan amount of 2500.00 from a balance of 2500.00 has been forgiven)(A previous settlement amount of 2500.00 has been rescinded)

nage# 13964074833						
CHEDULE C (FEC Form 3) DANS		Use separate schedule(s for each category of the Detailed Summary Page	he (check only one) X 13a			
AME OF COMMITTEE (In Full) AFERLA FOR CONGRESS		Transacti	on ID : SC/10.4628			
LOAN SOURCE Full Name (Last, First, Mid Dr. JOHN JAMES LAFERLA	ldle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General			
Mailing Address 209 BIRCH RUN ROAD			Other (specify)			
City	State ZIP Co	de				
CHESTERTOWN	MD 21620					
Original Amount of Loan	Cumulative Payment To		ce Outstanding at Close of This Period			
10000.00		0.00	10000.00			
TERMS Date Incurred	Date Due	Interest Rate	Secured:			
		1/1/20 ^Y 0.00	w (apr) □ _{Yes} ⊠ _{No}			
List All Endorsers or Guarantors (if any) to	o Loan Source					
1. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City State	ZIP Code	Guaranteed Outstanding:	y			
2. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City State	ZIP Code	Guaranteed Outstanding:	y			
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:	yy			
4. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:	y			
Carry outstanding balance only to LINE 3. Sch	()		10000.00			

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: SC/10 Transaction ID : SC/10.4628

(Current loan amount of 10000.00 from a balance of 10000.00 has been forgiven)(A previous settlement amount of 10000.00 has been rescinded)

age# 13964074835		
CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page
ME OF COMMITTEE (In Full) AFERLA FOR CONGRESS		Transaction ID : SC/10.4977
LOAN SOURCE Full Name (Last, First Dr. JOHN JAMES LAFERLA	, Middle Initial)	Election: 2012 Primary General
Mailing Address 209 BIRCH RUN ROAD		Other (specify)
City	State ZIP Co	ode
CHESTERTOWN	MD 21620	
Original Amount of Loan 3518.63	Cumulative Payment To	Date Balance Outstanding at Close of This Peri 0.00 3518.63
TERMS		
Date Incurred	Date Due	
^M 03 ^M / ^D 12 ^D / ^Y 2012 ^Y ^Y	M M / D D / Y	1/1/20 Y 0.00 % (apr)
List All Endorsers or Guarantors (if a	ny) to Loan Source	Yes N
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City Sta	te ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City Sta	te ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed
		Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This Page (optio	only)	

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: SC/10 Transaction ID : SC/10.4977

(Current loan amount of 3518.63 from a balance of 3518.63 has been forgiven)(A previous settlement amount of 3518.63 has been rescinded)

Image# 13964074837			
SCHEDULE C (FEC Form 3) LOANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 37 OF 40 FOR LINE NUMBER: (check only one)
NAME OF COMMITTEE (In Full) LAFERLA FOR CONGRESS		Transaction	ID : SC/10.5123
LOAN SOURCE Full Name (Last, First, Mic Dr. JOHN JAMES LAFERLA	ddle Initial)		ction: 2012 Primary General
Mailing Address 209 BIRCH RUN ROAD			Other (specify)
City	State ZIP Coo	le	
CHESTERTOWN	MD 21620		
Original Amount of Loan	Cumulative Payment To	Date Balance (0.00	Dutstanding at Close of This Period 10000.00
TERMS Date Incurred	Date Due	Interest Rate 1/1/20 Y 0.00	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if any) t	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 1 1 1
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 1 1 1
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). TOTALS This Period (last page in this line only Carry outstanding balance only to LINE 3. Sci	/)		10000.00

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`=H9A=N5 H=CB

Form/Schedule: SC/10 Transaction ID : SC/10.5123

(Current loan amount of 10000.00 from a balance of 10000.00 has been forgiven)(A previous settlement amount of 10000.00 has been rescinded)

SCHEDULE C (FEC Form 3) LOANS	PAGE 39 OF 40 Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) Transaction ID : SC/10.5767 [PERSONAL FUNDS] Election: 2012
LAFERLA FOR CONGRESS	[PERSONAL FUNDS] Election: 2012 Primary X General
LOAN SOURCE Full Name (Last, First, Middle Initial)	Primary X General
Dr. JOHN JAMES LAFERLA	
Mailing Address 209 BIRCH RUN ROAD	
City State ZIP Code	e
CHESTERTOWN MD 21620	
Original Amount of Loan Cumulative Payment To E 3000.00	Date Balance Outstanding at Close of This Period 0.00 3000.00
TERMS	
Date Incurred Date Due	2/31/14 0.00 % (apr) 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) TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If not started to the started st	

mage# 13964074840									= 40
CHEDULE C (FEC Form 3) OANS				for each ca	ate schedule(ategory of the ummary Page	the (check only one)			
NAME OF COMMITTEE (IN FU	,			•	Transact	ion ID : SC	/10.5800		
LOAN SOURCE Full Nar Dr. JOHN JAMES I		ddle Initial)		[PERSONAL	. FUNDS]	Election: Prima	ry		
Mailing Address 209 BIRCH RUN ROAD						<u> </u>	(specify) 🔻		
City		State	ZIP Cod	le					
CHESTERTOWN		MD	21620						
Original Amount of Loan		Cumulative	Payment To I			nce Outstar	nding at Clos		
	10000.00		9 9	0.00				10000.0	J0
TERMS Date Incur	red		Date Due	I	nterest Rate		S	ecured:	
M 10 ^M / 22 ^D /	Ý Ž012 Ý	M M / D	D / Y12/	/31/2014 ^Y	0.00	%	(apr)	Yes	X
List All Endorsers or Gu		o Loan Sour	ce						
1. Full Name (Last, First,	Middle Initial)			Name of Emp	loyer				
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:		,	7]
2. Full Name (Last, First,	Middle Initial)			Name of Emp	loyer				
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:		· · · ·	7	*	
3. Full Name (Last, First,	Middle Initial)			Name of Emp	loyer				
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:		7]
4. Full Name (Last, First,	Middle Initial)			Name of Emp	loyer				
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	7	*]
SUBTOTALS This Period Th	is Page (optional).				•			10000.0	00
TOTALS This Period (last pa	ge in this line only	y)				,	,	39018.6	33
Carry outstanding balance of	only to LINE 3. Sch	nedule D. for	this line. If n	o Schedule D	. carry forw	ard to app	ropriate line	of Sum	ımarv.