PAGE 1 / 8

Image# 201607159020481813

# REPORT OF RECEIPTS

FORM 3		SBURSEI Authorized Com		Offic	ce Use Only
1. NAME OF COMMITTEE (in	TYPE OR PRIM		cample: If typing, type ver the lines.	12FE4M5	
BOB MARSHA	ALL FOR CONGRE	SS			
ADDRESS (number ar		W POND COURT			
Check if difthan previous reported. (A	usly   MANASSAS			VA 2011	1
2. <b>FEC IDENTIFIC</b>	CATION NUMBER	CITY		STATE A	ZIP CODE A STATE ▼ DISTRICT
C C0055852	28	3. IS THIS REPORT	× NEW (N) OR	AMENDED (A)	VA 00
(a) Quarterly Roman April 15  X July 15  Octobe  January	PORT (Choose One) eports: 5 Quarterly Report (Q1) Quarterly Report (Q2) r 15 Quarterly Report (Q3) r 31 Year-End Report (YE)	Election on	General (30G)	General (12G)  Special (12S)	in the State of  Special (30S)  in the State of
5. Covering Period	M M / D D D 01	/ Y Y Y Y Y 2016	through	06 30 / Y	Y Y Y 2016
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 Mary Rose Lalli					
Signature of Treasure			[Electronically Filed]	Date O6 /	30 /
	false, erroneous, or incomp	lete information may	subject the person sign	ing this Report to the pe	enalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3 (Revised 02/2003)

### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name

#### **BOB MARSHALL FOR CONGRESS**

R	eport	Covering the Period: From:	04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	06 / 30 / Y 2016 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))	0.00	77461.89
	(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))	0.00	77461.89
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	538.85	49969.53
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	538.85	49969.53
8.		ch on Hand at Close of porting Period (from Line 27)	26869.81	
9.	the	ots and Obligations Owed <b>TO</b> Committee (Itemize all on ledule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed <b>BY</b> Committee (Itemize all on ledule C and/or Schedule D)	10475.96	

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts PAGE 3 / 8 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

### **BOB MARSHALL FOR CONGRESS**

04 01 2016 06 30 2016 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
I1. C	ONTRIBUTIONS (other than loans) FROM:		
(a)	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	0.00	62303.04
	(ii) Unitemized	0.00	12158.85
	(iii) TOTAL of contributions from individuals	0.00	74461.89
(b)	•	0.00	0.00
(c)	Other Political Committees (such as PACs)	0.00	3000.00
(d) (e)	TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	77461.89
	RANSFERS FROM OTHER JTHORIZED COMMITTEES	0.00	0.00
	DANS:		
(a)	Made or Guaranteed by the Candidate	0.00	0.00
(b)		0.00	0.00
(c)	TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
	FFSETS TO OPERATING  (PENDITURES		
	efunds, Rebates, etc.)	0.00	0.00
	THER RECEIPTS ividends, Interest, etc.)	0.00	0.00
11	OTAL RECEIPTS (add Lines (e), 12, 13(c), 14, and 15) arry Total to Line 24, page 4)	0.00	77461.89

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4/8

		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPI	ERATING EXPENDITURES	538.85	49969.53
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LOA	AN REPAYMENTS:		
	(a)	Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b)	Of All Other Loans	0.00	0.00
	(c)	TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REF	FUNDS OF CONTRIBUTIONS TO:		
	(a)	Individuals/Persons Other Than Political Committees	0.00	0.00
	(I-\		0.00	0.00
	(b)	Political Party Committees Other Political Committees		
		(such as PACs)	0.00	0.00
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTI	HER DISBURSEMENTS	0.00	0.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	538.85	49969.53
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	27408.66
24	то	TAL RECEIPTS THIS PERIOD (from Line 1	6, page 3)	0.00
25.	SUI	BTOTAL (add Line 23 and Line 24)		27408.66
26.	TO	TAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	538.85
27.	CAS	SH ON HAND AT CLOSE OF REPORTING	G PERIOD	26869.81

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE	NUMBE	R:		PAGE	5	OF	8
Use separate schedule(s)	(check only one)							
for each category of the Detailed Summary Page	×	]17		18		19a		19b
Detailed Suffillary Fage		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) **BOB MARSHALL FOR CONGRESS** Full Name (Last, First, Middle Initial) Date of Disbursement Mary Rose Lalli 2016 Mailing Address 8066 Stillbrooke Road 06 28 City State Zip Code Amount of Each Disbursement this Period VA Manassas 20112 Purpose of Disbursement Accounting Fees 500.00 Memo Item Candidate Name Category/ **BOB MARSHALL FOR CONGRESS** Type Transaction ID: SB17.6730 Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President VΑ State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Memo Item Candidate Name Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Memo Item Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 500.00 SUBTOTAL of Disbursements This Page (optional)..... 500.00

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

## SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

NAME OF COMMITTEE (In Full)

PAGE OF 8 (Use separate schedule(s) FOR LINE NUMBER: for each (check only one) 9 numbered line) **X** 10

<b>BOB MARSHALL FOR</b>	CONGRESS		
A. Full Name (Last, First, Middle Initial) of Debto Robert Marshall	Nature of Debt (Purpose): Campaign Material Expenses to reimbursed on personal credit cards		
Mailing Address 7930 Willow Pond Court	Mailing Address 7930 Willow Pond Court		
City State Manassas	Zip Code VA 20111	-	
Outstanding Balance Beginning This Period		Transaction ID : SD10.6474	
2237.21	2237.21		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2237.21	
B. Full Name (Last, First, Middle Initial) of Debtor Robert Marshall	or Creditor	Nature of Debt (Purpose): Repulican Party Filing Fee to be reimbursed	
Mailing Address 7930 Willow Pond Court			
City State Manassas	Zip Code VA 20111		
Outstanding Balance Beginning This Period		Transaction ID : SD10.6475	
6960.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	6960.00	
C. Full Name (Last, First, Middle Initial) of Debto Robert Marshall	r or Creditor	Nature of Debt (Purpose): Internet/Email Expenses to be reimbursed	
Mailing Address 7930 Willow Pond Court			
City Manassas	State Zip Code VA 20111		
Outstanding Balance Beginning This Period		Transaction ID : SD10.6476	
335.52			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	335.52	
1) SUBTOTALS This Period This Page (optional)	<b>&gt;</b>	9532.73	
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)		

# SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 7 OF
FOR LINE NUMBER:
(check only one)

:		
		9
	X	10

8

NAME OF COMMITTEE (In Full)

BOB MARSHALL FOR	CONGRESS	
A. Full Name (Last, First, Middle Initial) of Debto Robert Marshall	r or Creditor	Nature of Debt (Purpose):  Meals Expenses to be reimbursed
Mailing Address 7930 Willow Pond Court		
City State Manassas	Zip Code VA 20111	
Outstanding Balance Beginning This Period		Transaction ID : SD10.6477
6.25		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	6.25
B. Full Name (Last, First, Middle Initial) of Debtor Robert Marshall	or Creditor	Nature of Debt (Purpose): Office Supplies Expenses on personal credit cards to be reimbursed
Mailing Address 7930 Willow Pond Court		
City State Manassas	Zip Code VA 20111	
Outstanding Balance Beginning This Period  429.55  Amount Incurred This Period  0.00	Payment This Period 0.00	Transaction ID : SD10.6478  Outstanding Balance at Close of This Period  429.55
C. Full Name (Last, First, Middle Initial) of Debto Robert Marshall	r or Creditor	Nature of Debt (Purpose): Postage Expenses on personal credit cards to be reimbursed
Mailing Address 7930 Willow Pond Court		
City Manassas	State Zip Code VA 20111	
Outstanding Balance Beginning This Period		Transaction ID: SD10.6479
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	372.87
1) SUBTOTALS This Period This Page (optional)		808.67
2) TOTALS This Period (last page this line number	only)	<b>&gt;</b>
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	<b>&gt;</b>
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only	) >

# SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

**Excluding Loans** 

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

PAGE 8 OF
FOR LINE NUMBER:
(check only one)

:		
		9
	X	10

8

NAME OF COMMITTEE (In Full)

ROB MARSHALL FOR CONGRESS

E	OB MARSHALL FOR	CONG	KESS		
	A. Full Name (Last, First, Middle Initial) of Debto Robert Marshall	or or Creditor		Nature of Debt (Purpose):  Travel/Gas Expenses on personal credit cards to be reimbursed	
İ	Mailing Address 7930 Willow Pond Court				
	City State Manassas	Zip Code VA	20111		
	Outstanding Balance Beginning This Period  134.56  Amount Incurred This Period  0.00	Payme	ent This Period 0.00	Transaction ID : SD10.6480  Outstanding Balance at Close of This Period  134.56	
-	B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):	
-	Mailing Address				
ı	City State	Zip Code			
	Outstanding Balance Beginning This Period  Amount Incurred This Period	Payme	ent This Period	Outstanding Balance at Close of This Period	
	C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of Debt (Purpose):	
	Mailing Address				
	City	State	Zip Code		
	Outstanding Balance Beginning This Period  Amount Incurred This Period	Payme	ent This Period	Outstanding Balance at Close of This Period	
1)	SUBTOTALS This Period This Page (optional)			134.56	
2)	TOTALS This Period (last page this line number	only)	<b>)</b>	10475.96	
3)	TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	)	0.00	
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)			10475.96	