

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

2012 APR 13 AM 11:29 Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

FEC MAIL CENTER

MARILYN SINGLETON FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 2767



Check if different than previously reported. (ACC)

OAKLAND

CA

94602

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

00507418

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

CA

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M

D D

Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M

D D

Y Y Y Y

in the State of

5. Covering Period

01

01

2012

through

03

31

2012

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

DAN JEFFREY BROWN

Signature of Treasurer

[Handwritten Signature]

Date

03

31

2012

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

12030773881

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

MARILYN SINGLETON FOR CONGRESS

Report Covering the Period:

From:

01 / **01** / **2012**

To:

03 / **31** / **2012**

	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))	13,618.84	16,748.40
(b) Total Contribution Refunds (from Line 20(d))	none	none
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	13,618.84	13,618.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11,479.14	13,054.89
(b) Total Offsets to Operating Expenditures (from Line 14)	none	none
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	11,479.14	13,054.89
8. Cash on Hand at Close of Reporting Period (from Line 27)	10,838.78	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	none	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	9,000.00	

For further information contact:

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

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

12030773882

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 12/2003)

of Receipts

Page 3

Write or Type Committee Name

MARILYN SINGLETON FOR CONGRESS

Report Covering the Period: From:

01 / **01** / **2013**

To:

03 / **31** / **2012**

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).....

6950.00

8200.00

(ii) Unitemized.....

6548.00

6813.81

(iii) TOTAL of contributions from individuals ▶

13498.00

15013.81

(b) Political Party Committees.....

none

none

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

none

none

(d) The Candidate.....

120.84

1726.59

(e) TOTAL CONTRIBUTIONS (other than loans)

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

13618.84

16740.40

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

none

none

13. LOANS:

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

9000.00

9000.00

(b) All Other Loans.....

none

none

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

9000.00

9000.00

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

none

none

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

none

none

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

22618.84

25740.40

12030773883

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	11,479.14	130,548.9
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	1,836.91	1,846.73
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	13,316.05	149,016.2

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	15,359.9
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	226,188.4
25. SUBTOTAL (add Line 23 and Line 24).....	241,548.3
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	13,316.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10,938.78

12030773884

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE **1** OF **3**
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

MARILYN SINGLETON FOR CONGRESS

Full Name (Last, First, Middle Initial)

GRAVES, HEATHER

A.

Mailing Address

254 SEMPLE XING

City

BENICIA

State

CA

Zip Code

94510

FEC ID number of contributing federal political committee.

C

Name of Employer

none

Occupation

HOUSEWIFE

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

09 / 29 / 2011

Amount of Each Receipt this Period

1,000.00

**MEMO:
CONTRIBUTION PRIOR
TO FILING, i.e. TESTING
WATERS PERIOD**

Full Name (Last, First, Middle Initial)

LIBERTY, MARGIE

B.

Mailing Address

151 O'NEIL CIRCLE

City

HERCULES

State

CA

Zip Code

94547

FEC ID number of contributing federal political committee.

C

Name of Employer

self-employed

Occupation

Real Estate

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

1290.00

Date of Receipt

10 / 31 / 2011

Amount of Each Receipt this Period

250.00

**MEMO:
CONTRIBUTION PRIOR
TO FILING, i.e. TESTING
WATERS PERIOD**

Full Name (Last, First, Middle Initial)

LIBERTY, MARGIE

C.

Mailing Address

151 O'NEIL CIRCLE

City

HERCULES

State

CA

Zip Code

94547

FEC ID number of contributing federal political committee.

C

Name of Employer

self-employed

Occupation

Real Estate

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

1290.00

Date of Receipt

03 / 02 / 2012

Amount of Each Receipt this Period

1000.00

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

2250.00

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

8200.00

12030773885

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE **2** OF **3**
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

MARILYN SINGLETON FOR CONGRESS

Full Name (Last, First, Middle Initial)

MAPES, JUDITH

A. Mailing Address

404 West Whyte Ave

City **Roseville** State **CA** Zip Code **95678**

FEC ID number of contributing federal political committee.

C

Name of Employer

ARTECH SALES

Occupation

MANAGER

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

03 / 02 / 2012

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Humes, Lorraine

B. Mailing Address

3070 - 13th St.

City **San Pablo** State **CA** Zip Code **94860**

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

Retired

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

21000

Date of Receipt

03 / 01 / 2012

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Coleman, Robert

C. Mailing Address

178 DRACENA AVE

City **Piedmont** State **CA** Zip Code **94611**

FEC ID number of contributing federal political committee.

C

Name of Employer

Merrill Lynch

Occupation

STOCKBROKER

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

50000

Date of Receipt

03 / 28 / 2012

Amount of Each Receipt this Period

50000

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

320000

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

820000

12030773886

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE **3** OF **3**
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

MARILYN SINGLETON FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHRISTENSEN, FRANK

A.

Mailing Address

477 Crosby Rd

City

Ferndale

State

CA

Zip Code

95536

FEC ID number of contributing federal political committee.

C

Name of Employer

ERMA DARLING

Occupation

Apartment Manager

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

25000

Date of Receipt

03 / 27 / 2012

Amount of Each Receipt this Period

25000

Full Name (Last, First, Middle Initial)

BROWN, DAN

B.

Mailing Address

3871 Piedmont Ave #351

City

OAKLAND

State

CA

Zip Code

94611

FEC ID number of contributing federal political committee.

C

Name of Employer

AR TECH SALES

Occupation

Businessman

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

25000.00

Date of Receipt

03 / 02 / 2012

Amount of Each Receipt this Period

25000

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

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

2,750.00

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

8,200.00

12030773887

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 1 OF 2
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARILYN SINGLETON FOR CONGRESS

Full Name (Last, First, Middle Initial)
SINGLETON, MARILYN
 A. Mailing Address
3871 Piedmont Ave, # 351
 City **OAKLAND** State **CA** Zip Code **94611**

Date of Receipt
07' 15' 2011

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
40000

Name of Employer
self-employed Occupation **PHYSICIAN**

MEMO: IN KIND
MADE PRIOR TO FILING,
I.E., TESTING WATERS
website

Receipt For:
 Primary General
 Other (specify)
 Election Cycle-to-Date
172659

Full Name (Last, First, Middle Initial)
SINGLETON, MARILYN
 B. Mailing Address
3871 Piedmont Ave, # 351
 City **OAKLAND** State **CA** Zip Code **94611**

Date of Receipt
08' 16' 2011

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
22500

Name of Employer
self-employed Occupation **PHYSICIAN**

MEMO: IN KIND
MADE PRIOR TO FILING,
I.C. TESTING WATERS
webster vendor Booth

Receipt For:
 Primary General
 Other (specify)
 Election Cycle-to-Date
172659

Full Name (Last, First, Middle Initial)
SINGLETON, MARILYN
 C. Mailing Address
3871 Piedmont Ave # 351
 City **OAKLAND** State **CA** Zip Code **94611**

Date of Receipt
09' 15' 2011

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
25000

Name of Employer
self-employed Occupation **Physician**

MEMO: In Kind
made prior to filing,
I.E., TESTING WATERS
Diamond Vendor Booth

Receipt For:
 Primary General
 Other (specify)
 Election Cycle-to-Date
172659

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

87500
108853

12030773888

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE **2 OF 2**
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

MARILYN SINGLETON FOR CONGRESS

Full Name (Last, First, Middle Initial)

SINGLETON, MARILYN

A. Mailing Address

3871 Redmont Ave #351

City

OAKLAND

State

CA

Zip Code

94611

Date of Receipt

09 / 27 / 2011

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

21353

Name of Employer

Self-employed

Occupation

PHYSICIAN

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

172659

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

Date of Receipt

MM / DD / YYYY

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

Date of Receipt

MM / DD / YYYY

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

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

21353

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

108853

12030773889

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

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

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

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NAME OF COMMITTEE (In Full)

MARILYN SINGLETON FOR CONGRESS

Full Name (Last, First, Middle Initial)

SINGLETON, MARILYN

A. Mailing Address

3871 Piedmont Ave #351

City

OAKLAND

State

CA

Zip Code

94611

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-employed

Occupation

Physician

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

900000

Date of Receipt

03 / 26 / 2012

Amount of Each Receipt this Period

900000

**MEMO;
Personal Funds**

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

900000

TOTAL This Period (last page this line number only)

900000

12030773890

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

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

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NAME OF COMMITTEE (In Full)

MARILYN SINGLETON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FLAT RATE SITES, COM

Date of Disbursement: 07 15 2011

Mailing Address: 4200 PARK BLVD #223

City: OAKLAND CA State Zip Code: 94602

Purpose of Disbursement: IN-KIND: WEBSITE

Candidate Name: MARILYN M. SINGLETON

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: CA District: 13

Amount of Each Disbursement this Period: 400.00
MEMO: MADE PRIOR TO FILING. IE, TESTING THE WATERS

B. WEBSTER STREET BUSINESS ASSOC.

Date of Disbursement: 08 10 2011

Mailing Address: 1509 1/2 WEBSTER ST.

City: ALAMEDA, CA State Zip Code: 94501

Purpose of Disbursement: INKIND: STREET FAIR VENDOR BOOTH

Candidate Name: MARILYN M. SINGLETON

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: CA District: 13

Amount of Each Disbursement this Period: 225.00
MEMO. MADE PRIOR TO FILING IE, TESTING THE WATERS

C. DIMOND IMPROVEMENT ASSOC.

Date of Disbursement: 09 15 2011

Mailing Address: 4200 PARK BLVD #128

City: OAKLAND CA State Zip Code: 94602

Purpose of Disbursement: INKIND - STREET FAIR VENDOR BOOTH

Candidate Name: MARILYN M. SINGLETON

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: CA District: 13

Amount of Each Disbursement this Period: 250.00
MEMO: MADE PRIOR TO FILING IE: TESTING THE WATERS

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

875.00

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

12170.83

12030773891

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MARILYN SINGLETON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) **MINUTEMAN PRESS DUBLIN** Date of Disbursement **09 27 2011**

Mailing Address **6735 SIERRA CT-STE C**

City **DUBLIN** State **CA** Zip Code **94568**

Purpose of Disbursement **PALM CARDS - IN KIND** Category/Type **006** Amount of Each Disbursement this Period **213.53**

Candidate Name **MARILYN M. SINGLETON**

Office Sought: House Disbursement For: Primary General
 Senate Other (specify)

President

State: **CA** District: **13**

MEMO: MADE PRIOR TO FILING - IE TESTING THE WATERS

B. Full Name (Last, First, Middle Initial) **ALAMEDA COUNTY REGISTRAR** Date of Disbursement **03 07 2012**

Mailing Address **1225 FALLON ST**

City **OAKLAND** State **CA** Zip Code **94612**

Purpose of Disbursement **CANDIDATE STATEMENT** Category/Type **001** Amount of Each Disbursement this Period **9496.00**

Candidate Name **MARILYN M. SINGLETON**

Office Sought: House Disbursement For: Primary General
 Senate Other (specify)

President

State: **CA** District: **13**

C. Full Name (Last, First, Middle Initial) **SECRETARY OF STATE** Date of Disbursement **03 21 2012**

Mailing Address **1500 - 17TH ST., 5TH FLOOR**

City **SACRAMENTO, CA** State **CA** Zip Code **95814**

Purpose of Disbursement **FILING FEE** Category/Type **001** Amount of Each Disbursement this Period **1586.30**

Candidate Name **MARILYN M. SINGLETON**

Office Sought: House Disbursement For: Primary General
 Senate Other (specify)

President

State: **CA** District: **13**

SUBTOTAL of Disbursements This Page (optional) **11295.83**

TOTAL This Period (last page this line number only) **12170.83**

12030773892

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

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

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NAME OF COMMITTEE (In Full)

MARILYN SINGLETON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. **MINUTEMAN PRESS DUBLIN**

Date of Disbursement

03 / 28 / 2012

Mailing Address

6735 SIERRA CT. STE C

City

DUBLIN

State

CA

Zip Code

94568

Amount of Each Disbursement this Period

1812.71

Purpose of Disbursement

BROCHURES

006

Candidate Name

MARILYN M. SINGLETON

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

CA

District:

13

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

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

1812.71

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

1812.71

12030773893

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full)
MARILYN SINGLETON FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)
Singleton, Marilyn (personal funds)
Election: Primary General Other (specify)
Mailing Address
3871 Piedmont Ave #351

City State ZIP Code
Oakland CA 94611

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
900000 000000 900000

TERMS Date Incurred Date Due Interest Rate Secured:
03/29/2012 M M D D none none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source **none**

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 900000
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 900000
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 900000
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 900000

SUBTOTALS This Period This Page (optional) **900000**
TOTALS This Period (last page in this line only) **900000**

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

12030773894

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

Supplementary for
 Information found on
 Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) MARILYN JINGLETON FOR CONGRESS	FEC IDENTIFICATION NUMBER C
--	---------------------------------------

LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR)
---	----------------	---------------------

Mailing Address	Date Incurred or Established	Date Due
-----------------	------------------------------	----------

City	State	Zip Code	Date Due
------	-------	----------	----------

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

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

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

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____

What is the value of this collateral? _____

Does the lender have a perfected security interest in it? No Yes

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

What is the estimated value? _____

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Date account established: _____

Location of account: _____

Address: _____

City, State, Zip: _____

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

G. COMMITTEE TREASURER Typed Name Signature	DATE
---	------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

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

AUTHORIZED REPRESENTATIVE Typed Name Signature	DATE
--	------

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SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE OF

FOR LINE NUMBER: (check only one)

9
10

NAME OF COMMITTEE (In Full)

MARILYN SINGLETON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

[Empty box for Outstanding Balance Beginning This Period]

Amount Incurred This Period

[Empty box for Amount Incurred This Period]

Payment This Period

[Empty box for Payment This Period]

Outstanding Balance at Close of This Period

[Empty box for Outstanding Balance at Close of This Period]

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

[Empty box for Outstanding Balance Beginning This Period]

Amount Incurred This Period

[Empty box for Amount Incurred This Period]

Payment This Period

[Empty box for Payment This Period]

Outstanding Balance at Close of This Period

[Empty box for Outstanding Balance at Close of This Period]

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

[Empty box for Outstanding Balance Beginning This Period]

Amount Incurred This Period

[Empty box for Amount Incurred This Period]

Payment This Period

[Empty box for Payment This Period]

Outstanding Balance at Close of This Period

[Empty box for Outstanding Balance at Close of This Period]

1) SUBTOTALS This Period This Page (optional)

[Empty box for Subtotals]

2) TOTALS This Period (last page this line number only)

[Empty box for Totals]

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

[Empty box for Total Outstanding Loans]

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

[Empty box for Add 2) and 3)]

12030773896

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

Name of Principal Campaign Committee (In Full) MARLYN SINGLETON FOR CONGRESS		Report Covering Period: From: 01 / 01 / 2012 To: 03 / 31 / 2012				
Committee Name				(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees	
A						
B	Column Total Last Page Only.....					
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A	N/A					
B						
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A	N/A					
B						
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A	N/A					
B						
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A	N/A					
B						
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A	N/A					
B						

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JMC
PREPARER
 (3/2005)

4/13/12
DATE PREPARED

12030773898