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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3			authorized Co	mmittee	•	C	Office Use Only
NAME OF COMMITTEE (i		TYPE OR PRINT	•	Example: If typin over the lines.	ıg, type	12FE4M5	
LA FERLA FO	OR CONG	SRESS					I
ADDRESS (number a	and street)	209 BIRCH RU	JN ROAD				
		PO BOX 832					
Check if de than previous reported.	ously	CHESTERTO	WN			MD 21	1620
2. FEC IDENTIF	ICATION NU	JMBER ▼	CITY			STATE A	ZIP CODE
0 0005077	205	-	3. IS THIS	NIEVA	ı	AMENDE	STATE ▼ DISTRICT
C C005073	335		3. IS THIS REPORT	× NEW	OR	AMENDE (A)	MD 01
4. TYPE OF RI	EPORT (Cho	oose One)	(b) 12-Day P l	RE -Election Repo	ort for the		
(a) Quarterly I	Reports:		(a) 12 Day 11				a)
April 1	15 Quarterly F	leport (Q1)	_	Primary (12P)	General (120	G) Runoff (12R)
July 1	5 Quarterly R	eport (Q2)		Convention (12C)	Special (128	3)
		ly Report (Q3)	Election	on M M	D D /	Y " Y " Y	in the State of
Janua	ry 31 Year-En	d Report (YE)	(c) 30-Day P (OST-Election Rep	oort for the	:	
				General (300	à)	Runoff (30R	Special (30S)
Termir	nation Report	(TER)	Election	on	D D /	Y " Y " Y " Y	in the State of
5. Covering Perio		M / 01 /	2012 Y	through	M N	/ D D / 30	Y
I certify that I have	examined thi	s Report and to	the best of my	knowledge and	belief it is t	rue, correct and o	complete.
Type or Print Name	of Treasurer	Nancy E Harri	ison				
Signature of Treasu	rer <i>Nanc</i>	y E Harrison		[Electronically	Filed]	Date 10	/ D D / Y D Y D Y D Y D Y D Y D Y D Y D
NOTE: Submission of	of false, errone	ous, or incomple	ete information ma	ay subject the per	son signing	this Report to the	penalties of 2 U.S.C. §437g.
Office Use Only							FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

LA	FERL	A FOR	CONGRESS
----	-------------	-------	-----------------

			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))	10060.00	125600.2
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	4933.0
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	10060.00	120667.2
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	3687.21	140480.3
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	318.6
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3687.21	140161.7
8.		sh on Hand at Close of porting Period (from Line 27)	6524.12	
9.	the	ots and Obligations Owed TO Committee (Itemize all on needule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	26018.63	

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

2012

07

01

FEC Form 3 (Revised 12/2003)

PAGE 3 / 25

2012

18446.07

125600.25

09

30

Write or Type Committee Name

LA FERLA FOR CONGRESS

Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 8450.00 71275.00 (i) Itemized (use Schedule A)...... 1610.00 29379.18 (ii) Unitemized (iii) TOTAL of contributions 10060.00 100654.18 from individuals 0.00 0.00 (b) Political Party Committees..... Other Political Committees 0.00 6500.00 (such as PACs).....

(d) The Candidate		Ι	7	Ι	Ι	7	Ι	(0.00			Ι	Ι	7	Ι	Ι	7	I
(e) TOTAL CONTRIBUTIONS																		
(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	П	Ţ	T	Ţ	T	-	Ī	10060	0.00	1	Γ	Ţ	Ī	T	Ţ	Ţ	-	

12. TRANSFERS FROM OTHER		
ALITHORIZED COMMITTEES	0.00	0.00

12. TRANSFERS FROM OTHER													7
AUTHORIZED COMMITTEES						0.00)						0.
AOTHORIZED GOWINITTEEG	_	7		9		-/80	_		7		7	-	-(8)

13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	32664.70
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	32664.70

14. OFFSETS TO OPERATING		
EXPENDITURES (Refunds, Rebates, etc.)	0.00	318.61

15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	10060.00	158583.56

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	3687.21	140480.37
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	6646.07
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	6646.07
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	4933.00
	(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	4933.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	3687.21	152059.44
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	151.33
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	10060.00
25.	SUBTOTAL (add Line 23 and Line 24)		10211.33
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	3687.21
27.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	6524.12

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

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

FOR	LINE	NU	MBER:	PAGE	:	5	OF	25
(chec	ck only	or	ne)					
	11a		11b	11c		11	d	_
	12		13a	13b		14	ļ.	15

Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pdress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Fouad Abbas Mailing Address 7018 Rock Stream Court			Date of Receipt
	City Baltimore	State MD	Zip Code 21209	08 06 2012 Transaction ID : SA11AI.5521
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Self	Occupation Physician		200.00
	Receipt For: 2012 Primary General Other (specify)	Election Cycl	le-to-Date 1200.00	
В.	Full Name (Last, First, Middle Initial) Madeline Adams Mailing Address 203 E. William Street			Date of Receipt
	City Salisbury	State MD	Zip Code 21801	09 28 2012 Transaction ID : SA11AI.5611
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Self Employed	Occupation Editor		500.00
	Receipt For: 2012 Primary General Other (specify)	Election Cycl	500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Ms O Marie Anderson			Date of Receipt
Ο.	Mailing Address 919 N. Meadowview Dr City	State	Zip Code	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Chestertown	MD	21620	Transaction ID : SA11AI.5552
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Retired	Occupation Retired		200.00
	Receipt For: 2012 Primary Signal General Other (specify)	Election Cycl	700.00	
Г	SUBTOTAL of Receipts This Page (optional)			900.00

SCHEDULE A (FEC Form 3)

Other (specify)

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

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

25 FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

ITEMIZED RECEIPTS 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) LA FERLA FOR CONGRESS Full Name (Last, First, Middle Initial) Margie Baker Date of Receipt Mailing Address 220 Calvert Street 2012 19 City State Zip Code Transaction ID: SA11AI.5546 MD 21620 Chestertown FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 100.00 Name of Employer Occupation Retired Retired Receipt For: 2012 Election Cycle-to-Date Primary X General 325.00 Other (specify) Full Name (Last, First, Middle Initial) Thomas Brown Date of Receipt Mailing Address 4241 North Sand Rd 06 2012 City State Zip Code Transaction ID: SA11AI.5520 Hershey NE 69143 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Farmer Self Receipt For: 2012 Election Cycle-to-Date | Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) Robert Bryan Jr. Date of Receipt Mailing Address 13761 Shallcross Wharf 2012 25 City Zip Code State Transaction ID: SA11AI.5551 MD Kennedyville 21645 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Retired Retired Receipt For: 2012 Election Cycle-to-Date X General Primary

600.00

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

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

FOR L	FOR LINE NUMBER:			PAGE	7	OF	25
(check							
X 1	1a	11b		11c	110	d	
1:	2	13a		13b	14		15

		Statements may not be sold or used by any pe e name and address of any political committee	
	NAME OF COMMITTEE (In Full)		
//	LA FERLA FOR CONGRESS		
	Full Name (Last, First, Middle Initial) Mrs. Muriel J Cole		
A.		Date of Receipt	
	Mailing Address 207 E. Campus Ave	09 20 2012	
	City		
	Chestertown	MD 21620	Transaction ID : SA11AI.5548
	FEC ID number of contributing		
	federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	1000.00
	Retired	Retired	, , , , , ,
	Receipt For: 2012	Election Cycle-to-Date	-
	Primary General	Elocion Gyolo to Bato	
	Other (specify)	2500.00	
	Full Name (Last, First, Middle Initial)		
В.	Susan Delean-Botkin		Date of Receipt
	Mailing Address 202 Third Street	09 28 2012	
	City	State Zip Code	Transaction ID : SA11AI.5612
	Oxford MD 21654		
	FEC ID number of contributing	C	Amount of Each Receipt this Period
	federal political committee.	O	y another the Eden Heddipt and Ferred
	Name of Employer	Occupation	250.00
	Family Care of Easton	Nurse Practitioner	,
	Receipt For: 2012	Election Cycle-to-Date	-
	Primary Seneral		
	Other (specify)	450.00	
_	Full Name (Last, First, Middle Initial)	, , , , , , , , , , , , , , , , , , , ,	
C.	Michael Franch		Date of Receipt
٠.	Mailing Address 607 East 34th Street		08 13 2012
	City	State Zip Code	Transaction ID : SA11AI.5526
	Baltimore	MD 21218	
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	100.00
	None	Not employed	
	Receipt For: 2012	Election Cycle-to-Date	-
	Primary General		
	Other (specify)	250.00	
Г	L		1350.00
S	SUBTOTAL of Receipts This Page (optional)		
Т	OTAL This Period (last page this line number		

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

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

FOR LINE NUMBER: [PAGE	:	8_	OF		25		
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_						12	13a	13b	14	15
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements ma	ay not be sol ddress of an	d or used by any y political committ	person t	for the	purpose ontribution	of soliciting	ng contrib	outions nittee.
\vdash			· · · · · · · · · · · · · · · · · · ·							
$ \rangle$	NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS									
	Full Name (Last, First, Middle Initial)									
A.	R. Dennis Hager				n	ate of	Receipt			
۸.	Mailing Address 373 Cypress St					M M	/ D	D / Y	YY	Υ
	PO Box 390					09	28		2012	
	City	State	Zip Code	•	Tra	nsacti	on ID : SA	A11AI.561	4	
	Millington	MD	21651							
	FEC ID number of contributing federal political committee.	С			A	mount	of Each	Receipt th	is Period	
	Name of Employer	Occupation							1000.	.00
	Millington Pharmacy	Pharmacist					7	7		
	Receipt For: 2012		ala ta Data							
	Primary General	Election Cy	cie-to-Date		_					
	Other (specify)			1150.00						
	Carlot (opcorry)		, , ,		-					
	Full Name (Last, First, Middle Initial) Christian Havemeyer					ate of	Receipt			
B.								_		
	Mailing Address 24031 Walnut Point Rd. City State Zip Code			L	09 18 2012			Y		
	Chestertown	MD	21620	•	Trai	nsactio	on ID : SA	11AI.554	3	
		.,,,,	21020							
	FEC ID number of contributing	С			A	mount	of Each	Receipt th	is Period	
	federal political committee.					-				
	Name of Employer	Occupation							750.	.00
	Retired	Retired						,		
	Receipt For: 2012	Election Cy	cle-to-Date							
	Primary General				- l					
	Other (specify)	1		750.00						
_										
	Full Name (Last, First, Middle Initial)									
C.	Barbara Jorgenson				D	ate of	Receipt			
	Mailing Address 209 Washington Ave					м = м 09	/ D 15		2012	Y
	City	State	Zip Code	9	Tra	nsacti	on ID : S	A11AI.553	2	
	Chestertown	MD	21620							
	FEC ID number of contributing						-4 F1	Danaist II	da Doode I	
	federal political committee.	C			A	mount	or Each	Receipt th	iis Period	
	Name of Employer	Occupation			[500	.00
	Joseph, Greenwald, & Laake	Occupation Attorney								
	Receipt For: 2012		ala to D. t							
	Receipt For: 2012 Y Primary General	Election Cy	cie-to-Date							
	Other (specify)			500.00						
	Other (Specify)		, , ,	300.00	4					
						_				
	LIPTOTAL of Descipts This Page (ast)					-			2250.	00
S	UBTOTAL of Receipts This Page (optional)				- -	-	-	- 1		===
I +	OTAL This Period (last page this line number)	anly)						_		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER:				PAGE	9	OF	25	
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X	11a		11b		11c	11	d	
	12		13a		13b	14		15

Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any petthe name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS		
Full Name (Last, First, Middle Initial) Stephen Meehan Mailing Address 105 Riverview Place City Chestertown FEC ID number of contributing federal political committee.	State Zip Code MD 21620	Date of Receipt 9 28 2012 Transaction ID: SA11AI.5613 Amount of Each Receipt this Period
Name of Employer Self Employed Receipt For: 2012 Primary General Other (specify)	Occupation Attorney Election Cycle-to-Date	250.00
Full Name (Last, First, Middle Initial) Frances Miller Mailing Address 221 Birch Run Rd City Chestertown	State Zip Code MD 21620	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: 2012 Primary General Other (specify)	Occupation Retired Election Cycle-to-Date	Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Robert Mintz Mailing Address 1721 Arlington Ave City Halethorpe FEC ID number of contributing federal political committee. Name of Employer The Walters Art Museum Receipt For: 2012 Primary Other (specify)	State Zip Code MD 21227 C Occupation Curator Election Cycle-to-Date	Date of Receipt M M / D D / 29 2012 Transaction ID: SA11AI.5585 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional).		1500.00
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3)

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

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

25 FOR LINE NUMBER: **PAGE** 10 OF (check only one) 11a 11b 11d 11c 12 13a 13b 14

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) LA FERLA FOR CONGRESS Full Name (Last, First, Middle Initial) **Eleanor Preston** Date of Receipt Mailing Address 6306 Swords Way 2012 20 City State Zip Code Transaction ID: SA11AI.5549 MD 20817 Bethesda FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 300.00 Name of Employer Occupation Self Employed Self Employed Receipt For: 2012 Election Cycle-to-Date X General Primary 300.00 Other (specify) Full Name (Last, First, Middle Initial) Joan Roache Date of Receipt Mailing Address 402 14th Street 24 2012 City State Zip Code Transaction ID: SA11AI.5615 Ocean City MD 21842 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Retired None Receipt For: 2012 Election Cycle-to-Date M General Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) Stanley Salett Date of Receipt Mailing Address 6860 Pentridge Ct 2012 30 City Zip Code State Transaction ID: SA11AI.5582 MD Chestertown 21620 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Self Consultant Receipt For: 2012 Election Cycle-to-Date Primary General 1500.00 Other (specify) 1300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	I I Statements may not be sold or used by any pe the name and address of any political committee	
NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS	• •	
A. Full Name (Last, First, Middle Initial) Dana Simson Mailing Address 501 West Main Street City	State Zip Code	Date of Receipt 09 25 2012
Salisbury FEC ID number of contributing federal political committee.	MD 21801	Amount of Each Receipt this Period
Name of Employer Chesapeake East Calendar Guide Receipt For: 2012 Primary General Other (specify)	Occupation Business Owner Election Cycle-to-Date 450.00	In-kind - ad copy designed
B. Full Name (Last, First, Middle Initial) Mark C Stover Mailing Address 4712 Falcon St City	State Zip Code	Date of Receipt M M M
Rockville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2012 Primary Other (specify) General	MD 20853 C Occupation Consultant Election Cycle-to-Date 2000.00	Amount of Each Receipt this Period
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 Election Cycle-to-Date	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		700.00

SC ITE

Image# 12954387998			
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate scl for each categor Detailed Summar	y of the	FOR LINE NUMBER: PAGE 12 OF 25 (check only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			
NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. Act Blue			Date of Disbursement
Mailing Address 14 Arrow Street Suite 11			09 30 2012
City State Cambridge MA	Zip Code 02138		Amount of Each Disbursement this Period
Purpose of Disbursement payment processing fees		003	112.59 Transaction ID : SB17.5597
Candidate Name LA FERLA FOR CONGRESS		Category/ Type	Transaction is 1 of 1 income
Office Sought: House Disbursement F			
Full Name (Last, First, Middle Initial) Erik Gulbrandsen Mailing Address 23077 Old Fairlee Rd.			Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement
City State Chestertown MD	Zip Code 21620		Amount of Each Disbursement this Period
Chestertown MD Purpose of Disbursement Field Consulting	21020	001	1000.00
Candidate Name LA FERLA FOR CONGRESS		Category/ Type	Transaction ID: 3617.5575
Office Sought: House Disbursement F			
Full Name (Last, First, Middle Initial) C. Dr. JOHN JAMES DR J LA FERLA			Date of Disbursement
Mailing Address 209 BIRCH RUN ROAD			09
City State CHESTERTOWN MD	Zip Code 21620		Amount of Each Disbursement this Period
Purpose of Disbursement Meeting expense		007	120.52
Candidate Name LA FERLA FOR CONGRESS		Category/ Type	Transaction ID : SB17.5570

Office Sought:

MD

State:

District:

House

Senate

President

01

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

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

Disbursement For: 2012

Primary

Other (specify)

Meneral Control

В.

C.

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 OF 25 (check only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and	may not be sold or used by a	any person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS	,,	
Full Name (Last, First, Middle Initial) A. Dr. JOHN JAMES DR J LA FERLA Mailing Address 209 BIRCH RUN ROAD City State CHESTERTOWN MD Purpose of Disbursement Cell phone for campaign Candidate Name LA FERLA FOR CONGRESS Office Sought: House Disbursement For		Transaction ID : SB17.5571
Senate Primar President Other State: MD District: 01 Full Name (Last, First, Middle Initial)	y X General (specify)	
Mailing Address 201 Maple Ave		Date of Disbursement M M / D D / Y Y Y Y Y 09 17 2012
City State Chestertown MD Purpose of Disbursement e-media consulting Candidate Name LA FERLA FOR CONGRESS Office Sought: House Senate Disbursement For Primar	y General	Transaction ID : SB17.5568
State: MD District: 01 Full Name (Last, First, Middle Initial)	(specify)	
Main Street Business Solutions Inc. Mailing Address 102 Chester Village		Date of Disbursement M M / D D / Y Y Y Y 08 13 2012
•	Zip Code 21619	Amount of Each Disbursement this Period 350.00 Transaction ID: SB17.5564
Candidate Name LA FERLA FOR CONGRESS Office Sought: House Disbursement Formation		jory/
SUBTOTAL of Disbursements This Page (optional)		518.50

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

lm	nage# 12954388000			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 14 OF 25 (check only one) X 17
	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a			
\rangle	NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS			
۸.	Full Name (Last, First, Middle Initial) Main Street Business Solutions Inc.			Date of Disbursement
	Mailing Address 102 Chester Village			09 18 2012
	City State Chester MD	Zip Code 21619		Amount of Each Disbursement this Period
	Purpose of Disbursement debt payment - compliance		001	456.25 Transaction ID : SB17.5573
	Candidate Name LA FERLA FOR CONGRESS		Category/ Type	Transaction is 1 of moore
	Office Sought: House Disbursement For Primary	General		
3.	Full Name (Last, First, Middle Initial) Main Street Business Solutions Inc. Mailing Address 102 Chester Village			Date of Disbursement
		7:- 01-		09 18 2012
	City State Chester MD	Zip Code 21619		Amount of Each Disbursement this Period
	Purpose of Disbursement Compliance consultant		001	375.00 Transaction ID : SB17.5574
	Candidate Name LA FERLA FOR CONGRESS		Category/ Type	
	Office Sought: Yes ident Disbursement For	X General		
Э.	Full Name (Last, First, Middle Initial) Mr. Thomas Martin			Date of Disbursement
	Mailing Address 112 Cross Street			09 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		p Code 1620		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel, mileage reimbursment		002	94.35
	Candidate Name I A FERI A FOR CONGRESS		Category/	Transaction ID : SB17.5569

Disbursement For: 2012

Primary

Other (specify)

General

Office Sought:

MD

State:

House

Senate

District:

President

01

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

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

ln	nage# 12954388001			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	nedule(s) of the	FOR LINE NUMBER: PAGE 15 OF 25 (check only one) X 17
	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Dana Simson			Date of Disbursement
	Mailing Address 501 West Main Street			09 25 2012
	City State Salisbury MD	Zip Code 21801		Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind - ad copy designed			450.00 Transaction ID : SB17.5601
	Candidate Name		Category/ Type	Transaction ib . 3617.3001
	Office Sought: House Senate Primary President Disbursement For Primary Other (s	X General	.,,,,,	
	State: District: Full Name (Last, First, Middle Initial)			
В.	Beilin Zia Mailing Address 379 Cypress St			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Zip Code		07 13 2012
	City State Millington MD	21651		Amount of Each Disbursement this Period
	Purpose of Disbursement Communications		003	100.00 Transaction ID : SB17.5559
	Candidate Name LA FERLA FOR CONGRESS		Category/ Type	Transaction is . 35 m.sscs
	Office Sought: X House Disbursement For	General		
	State: MD District: 01			
C.	Full Name (Last, First, Middle Initial) Beilin Zia			Date of Disbursement
	Mailing Address 379 Cypress St			08
		p Code 21651		Amount of Each Disbursement this Period
	Purpose of Disbursement Communications		003	100.00
	Candidate Name LA FERLA FOR CONGRESS		Category/ Type	Transaction ID : SB17.5561

Type

General

Office Sought:

MD

State:

House

Senate

District:

President

01

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

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

Disbursement For: 2012

Primary Other (specify)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

19b 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) LA FERLA FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Beilin Zia 2012 Mailing Address 379 Cypress St 08 13 Zip Code City State Amount of Each Disbursement this Period MD Millington 21651 Purpose of Disbursement 100.00 Communications 003 Transaction ID: SB17.5562 Candidate Name Category/ LA FERLA FOR CONGRESS Type Disbursement For: 2012 Office Sought: House Senate Primary General Other (specify) President MD State: District: Full Name (Last, First, Middle Initial) Beilin Zia Date of Disbursement Mailing Address 379 Cypress St 09 17 2012 City State Zip Code Amount of Each Disbursement this Period MD 21651 Millington 100.00 Purpose of Disbursement Communications 003 Transaction ID: SB17.5567 Candidate Name Category/ LA FERLA FOR CONGRESS Type Disbursement For: Office Sought: 2012 House X General Senate Primary Other (specify) President State: MD District:

Full Name (Last,	First, Middle Initial)			
				Date of Disbursement
Mailing Address				M M / D D / Y Y Y
City		State Zip Code		Amount of Each Disbursement this Period
Purpose of Disb	ursement			
Candidate Name)		Category/ Type	
Office Sought:	House Senate President	Disbursement For: Primary General Other (specify)		
State:	District:			

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

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

C.

200.00

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

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OF

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for each category of the **X** 13a (check only one) Detailed Summary Page 13b Transaction ID: SC/10.4175 NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dr. JOHN JAMES DR J LA FERLA General Mailing Address Other (specify) ullet209 BIRCH RUN ROAD State ZIP Code City MD 21620 **CHESTERTOWN** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2500.00 0.00 2500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 12^M ^D30 2011 0.00 11/11/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 2500.00 TOTALS This Period (last page in this line only)

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

1mage# 12954388004 PAGE 18 / 25

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

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)

Form/Schedule: Transaction ID:

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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Detailed Summary Page Transaction ID: SC/10.4628 NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dr. JOHN JAMES DR J LA FERLA General Mailing Address Other (specify) ullet209 BIRCH RUN ROAD State ZIP Code City MD 21620 **CHESTERTOWN** Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 13^D ^M 02^M Ž012 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

1mage# 12954388006 PAGE 20 / 25

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

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)

Form/Schedule: Transaction ID:

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4977 NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Dr. JOHN JAMES DR J LA FERLA General Mailing Address Other (specify) ullet209 BIRCH RUN ROAD State ZIP Code City MD 21620 **CHESTERTOWN** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 3518.63 0.00 3518.63 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M ^D12 Ž012 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 3518.63 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

1mage# 12954388008 PAGE 22 / 25

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

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)

Form/Schedule: Transaction ID:

SCHEDULE C (FEC Form 3) **LOANS**

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

FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.5123 NAME OF COMMITTEE (In Full) LA FERLA FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Dr. JOHN JAMES DR J LA FERLA General Mailing Address Other (specify) \blacktriangledown 209 BIRCH RUN ROAD State ZIP Code City MD 21620 **CHESTERTOWN** Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 29 ^M 03^M Ž012 0.00 1/1/20 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) 26018.63 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

1mage# 12954388010 PAGE 24 / 25

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

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)

Form/Schedule: Transaction ID:

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 25 OF
FOR LINE NUMBER:
(check only one)

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X	10

25

NAME OF COMMITTEE (In Full)

L	.A FERLA FOR CONGI	RESS			
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose): Compliance and reporting services	
	Main Street Business Solutions Inc.			Compliance and reporting services	
f	Mailing Address 102 Chester Village			1	
ŀ	City State	Zip Code		-	
	Chester	MD	21619		
	Outstanding Balance Beginning This Period			Transaction ID : SD10.5491	
	806.25				
	Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period	
	0.00		806.25	0.00	
		7	7		
	B. Full Name (Last, First, Middle Initial) of Debtor or	r Creditor		Nature of Debt (Purpose):	
	Mailing Address				
ŀ	City State	Zip Code		-	
	Outstanding Balance Beginning This Period				
	Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period	
-					
	C. Full Name (Last, First, Middle Initial) of Debtor of	or Greditor		Nature of Debt (Purpose):	
	Mailing Address				
Ī	City	State	Zip Code		
-					
	Outstanding Balance Beginning This Period				
	Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period	
		7	7		
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1)	SUBTOTALS This Period This Page (optional)		>	0.00	
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4)	TOTALS This Period (last page this line number on	шу)		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
3)	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)					