

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Mark Greenberg for Congress

ADDRESS (number and street)

53 Peck Road

Check if different
than previously
reported. (ACC)

Torrington

CT

06790-6106

2. FEC IDENTIFICATION NUMBER ▼

C

C00493395

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

CT

05

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

M M / D D / Y Y Y Y

11

D D / Y Y Y Y

25

Y Y Y Y

2014

through

M M / D D / Y Y Y Y

12

D D / Y Y Y Y

31

Y Y Y Y

2014

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 J. Kenneth Nowell, CPA

Signature of Treasurer

J. Kenneth Nowell, CPA

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

15

Y Y Y Y

2015

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)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 56

Write or Type Committee Name

Mark Greenberg for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	4

	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))....	14600	414829.86
(b) Total Contribution Refunds (from Line 20(d))	0	22206.11
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	14600	392623.75
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	14580.13	1754527.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	14580.13	1754527.62
8. Cash on Hand at Close of Reporting Period (from Line 27).....	606.68	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1906281.31	

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

FEC Form 3 (Revised 12/2003)

PAGE 3 / 56

Write or Type Committee Name

Mark Greenberg for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

0

263631.11

(ii) Unitemized.....

0

30568.75

(iii) TOTAL of contributions from individuals ▶

0

294199.86

(b) Political Party Committees.....

0

5500

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

0

26500

(d) The Candidate.....

14600

88630

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

14600

414829.86

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0

0

13. LOANS:

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

0

1642900

(b) All Other Loans.....

0

0

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

0

1642900

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0

0

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0

1310.58

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

14600

2059040.44

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 56

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14580.13	1754527.62
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	280000
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	280000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	22206.11
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	22206.11
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	14580.13	2056733.73

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	586.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14600
25. SUBTOTAL (add Line 23 and Line 24).....	15186.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14580.13
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	606.68

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 56

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

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)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

Mark Greenberg

Mailing Address 184 Fern Avenue

City

Litchfield

State

CT

Zip Code

06759-2721

FEC ID number of contributing
federal political committee.**C** H0CT05150

Name of Employer

Mark Greenberg Real Estate

Occupation

Real Estate Developer

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1670730

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2014

Transaction ID : A-CF3916

Amount of Each Receipt this Period

12500

campaign contribution

Full Name (Last, First, Middle Initial)

Mark Greenberg

Mailing Address 184 Fern Avenue

City

Litchfield

State

CT

Zip Code

06759-2721

FEC ID number of contributing
federal political committee.**C** H0CT05150

Name of Employer

Mark Greenberg Real Estate

Occupation

Real Estate Developer

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1670730

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2014

Transaction ID : A-CF3917

Amount of Each Receipt this Period

2100

campaign contribution

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
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

14600.00

14600.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 56

<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

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)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

A. KB Strategic Group

Mailing Address PO Box 101682

City	State	Zip Code
Arlington	VA	22210-4682

Purpose of Disbursement
Fundraising: fundraising consultant

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2014

Amount of Each Disbursement this Period

1850

Transaction ID : B-E-3904

B. David DerwinMailing Address 1313 Grand Street
Apt. 205

City	State	Zip Code
Hoboken	NJ	07030-2252

Purpose of Disbursement
Advertising: production costs TV ad

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2014

Amount of Each Disbursement this Period

1500

Transaction ID : B-E-3731

C. William J Evans

Mailing Address 325 Celia Drive

City	State	Zip Code
Wolcott	CT	06705-3153

Purpose of Disbursement
General Consultant

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2014

Amount of Each Disbursement this Period

4500

Transaction ID : B-E-3915

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

7850.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 56

<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

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)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

A. J. Kenneth Nowell

Mailing Address 53 Peck Road

City	State	Zip Code
Torrington	CT	06790-6106

Purpose of Disbursement
event supplies, facility rental, catering, beverages

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2014

Amount of Each Disbursement this Period

4000

Transaction ID : B-E-3914

B. Maeve McHugh

Mailing Address PO Box 507

City	State	Zip Code
Niantic	CT	06357-0507

Purpose of Disbursement
Travel: Mileage reimbursement

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2014

Amount of Each Disbursement this Period

78.85

Transaction ID : B-E-3905

C. J. Kenneth Nowell

Mailing Address 53 Peck Road

City	State	Zip Code
Torrington	CT	06790-6106

Purpose of Disbursement
event supplies, facility rental, catering, beverages

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2014

Amount of Each Disbursement this Period

442.9

Transaction ID : B-E-3877

Original vendors exceeding reporting threshold itemized as memo transactions.

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

4521.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 56

<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

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)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

A. Riverhouse Catering

Mailing Address 1 Nod Road

City	State	Zip Code
Avon	CT	06001-3819

Purpose of Disbursement
catering election day

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

1796.9

Transaction ID : B-S-221

[MEMO ITEM]

Subitemization of J. Kenneth Nowell(12/05/14)

B. Palace Theater

Mailing Address 100 E Main Street

City	State	Zip Code
Waterbury	CT	06702-2312

Purpose of Disbursement
facility rental and beverages

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

2646

Transaction ID : B-S-222

[MEMO ITEM]

Subitemization of J. Kenneth Nowell(12/05/14)

C. CT Department of Revenue Services

Mailing Address PO Box 2931

City	State	Zip Code
Hartford	CT	06104-2931

Purpose of Disbursement
CT payroll tax

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2014

Amount of Each Disbursement this Period

111.78

Transaction ID : B-E-3920

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

111.78

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 9 OF 56

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 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)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

A. United States Treasury

Mailing Address PO Box 804521

City Cincinnati State OH Zip Code 45280-4521

Purpose of Disbursement
941 Federal payroll tax

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify)

State: District:

001

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
12 / 15 / 2014

Amount of Each Disbursement this Period

1996.6

Transaction ID : B-E-3921

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

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

1996.60

14480.13

SCHEDULE C (FEC Form 3)
LOANS

PAGE 10 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L27

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2012

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2012

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

500000

2600

212400

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
03 / 31 / 2012M M / D D / Y Y Y Y
/ / /D D / Y Y Y Y
/ / /

None

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)..... ►

212400.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 11 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L28

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2012

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Primary 2012

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

650000

1000

79000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 / 30 / 2012M M / D D / Y Y Y Y
/ / /D D / Y Y Y Y
/ / /

None

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)..... ►

79000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 12 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L29

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2012

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Primary 2012

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

75000

0

75000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
07 / 25 / 2012M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

75000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 13 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L30

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2012

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Primary 2012

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

95000

0

95000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
08 / 13 / 2012M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

95000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 14 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L32

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

17500

0

17500

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
05 / 03 / 2013M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

17500.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 15 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L33

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000

0

10000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 / 04 / 2013M M / D D / Y Y Y Y
/ / /D D / Y Y Y Y
/ / /

None

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)..... ►

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 16 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L34

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

7500

0

7500

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 18 / 2013M M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
None

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)..... ►

7500.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 17 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L35

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

8000

0

8000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
08 / 06 / 2013M M / D D / Y Y Y Y
/ / /D D / Y Y Y Y
/ / /

None

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)..... ►

8000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 18 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L36

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

10000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

10000

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 19 / 2013

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 19 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L37

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

12500

0

12500

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
09 / 04 / 2013M M / D D / Y Y Y Y
/ / NoneM M / D D / Y Y Y Y
/ / NoneM M / D D / Y Y Y Y
/ / None

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)..... ►

12500.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 20 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L38

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000

0

10000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
09 / 16 / 2013M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 21 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L39

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

15000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

15000

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 27 / 2013

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

15000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 22 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L40

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

7500

0

7500

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
11 / 02 / 2013M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

7500.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 23 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L41

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

8000

0

8000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
11 / 13 / 2013M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

8000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 24 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L42

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000

0

5000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
11 / 26 / 2013M M / D D / Y Y Y Y
/ / /D D / Y Y Y Y
/ / /Y Y Y Y
None

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)..... ►

5000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 25 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L44

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5500

0

5500

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
12 / 04 / 2013M M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
None

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)..... ►

5500.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 26 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L46

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

12000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

12000

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 11 / 2013

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

12000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 27 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L47

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

2000

0

2000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M

D 17 D

Y 2013 Y Y

M M

D D

Y None Y Y

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)..... ►

2000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 28 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L49

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000

0

10000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
01 / 28 / 2014M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

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.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 29 OF 56

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L50

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

7500

0

7500

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
02 06 / 2014M M / D D / Y Y Y Y
None

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)..... ►

7500.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 30 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L51

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

6000

0

6000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y
02 11 / 2014M M / D D / Y Y
NoneY Y Y Y
None

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)..... ►

6000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 31 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L52

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

97400

0

96000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
03 03 / 2014M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

96000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 32 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L54

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

10000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

10000

TERMS

Date Incurred

M M / D D / Y Y
05 / 21 / 2014

Date Due

M M / D D / Y Y
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 33 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L55

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Primary 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000

0

5000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 03 / 2014M M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
None

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)..... ►

5000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 34 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L56

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000

0

10000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 06 / 2014M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 35 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L57

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

15000

0

15000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 16 / 2014M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

15000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 36 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L58

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

15000

0

15000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 / 23 / 2014M M / D D / Y Y Y Y
/ / /D D / Y Y Y Y
/ / /

None

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)..... ►

15000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 37 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L59

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

235000

105000

130000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 / 30 / 2014

M M / D D / Y Y Y Y

None

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)..... ►

130000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 38 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L60

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

175000

171400

3600

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
07 / 03 / 2014M M / D D / Y Y Y Y
/ / /D D / Y Y Y Y
/ / /

None

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)..... ►

3600.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 39 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L61

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000

0

5000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
08 / 09 / 2014M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

5000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 40 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L62

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

12500

0

12500

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
08 / 15 / 2014M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

12500.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 41 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L63

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

300000

0

300000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
08 31 / 2014M M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
None

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)..... ►

300000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 42 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L64

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100000

0

100000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
09 30 / 2014M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

100000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 43 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L65

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

150000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

150000

TERMS

Date Incurred

M M / D D / Y Y
10 / 09 / 2014

Date Due

M M / D D / Y Y
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

150000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 44 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L66

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200000

0

200000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
10 / 15 / 2014M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

200000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 45 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L67

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

65000

0

65000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
10 / 23 / 2014M M / D D / Y Y Y Y
NoneY Y Y Y
None

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)..... ►

65000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 46 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L68

Mark Greenberg for Congress

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

Mark Greenberg

[PERSONAL FUNDS]

Election: 2014

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

25000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

25000

TERMS

Date Incurred

M M / D D / Y Y Y Y
10 / 28 / 2014

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

25000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 47 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L69

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

33000

0

33000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
10 / 29 / 2014M M / D D / Y Y Y Y
/ / /D D / Y Y Y Y
/ / /Y Y Y Y
None

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)..... ►

33000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 48 OF 56

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L70

Mark Greenberg for Congress

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

[PERSONAL FUNDS]

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

General 2014

Mailing Address
184 Fern Avenue

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

21000

0

21000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
11 / 04 / 2014M M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
None

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)..... ►

21000.00

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

1811500.00

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 49 OF 56

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

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

AT&T

Nature of Debt (Purpose):

Administrative/Salary/Overhead: u-verse
internet service

Mailing Address PO Box 8110

City State

Zip Code

Aurora

IL

60507-8110

Outstanding Balance Beginning This Period

25.83

Transaction ID : SD10-DEBT3902

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

25.83

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

Theroux, Nowell & Stoughton, LLC

Nature of Debt (Purpose):

Administrative/Salary/Overhead: accounting
and software

Mailing Address 53 Peck Road

City State

Zip Code

Torrington

CT

06790-6106

Outstanding Balance Beginning This Period

24665.25

Transaction ID : SD10-DEBT3958

Amount Incurred This Period

4487.5

Payment This Period

0

Outstanding Balance at Close of This Period

29152.75

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

Cooper Communications LLC

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Public
relations consultant

Mailing Address 77 Ripley Hill Road

City

State

Zip Code

Coventry

CT

06238-1631

Outstanding Balance Beginning This Period

11165.25

Transaction ID : SD10-DEBT3959

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

11165.25

1) **SUBTOTALS** This Period This Page (optional) ▶

40343.83

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 50 OF 56

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

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

United States Treasury

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Federal
Unemployment Tax 940 2014 Balance

Mailing Address PO Box 804521

City State

Zip Code

Cincinnati

OH

45280-4521

Outstanding Balance Beginning This Period

152.82

Transaction ID : SD10-DEBT3918

Amount Incurred This Period

1116.58

Payment This Period

0

Outstanding Balance at Close of This Period

1269.4

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

Admin. Of Unemployment Compensation

Nature of Debt (Purpose):

Administrative/Salary/Overhead: SUTA payroll
tax Quarter 4 2014

Mailing Address PO Box 2940

City State

Zip Code

Hartford

CT

06104-2940

Outstanding Balance Beginning This Period

0

Transaction ID : SD10-DEBT3938

Amount Incurred This Period

1175.26

Payment This Period

0

Outstanding Balance at Close of This Period

1175.26

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

William J Evans

Nature of Debt (Purpose):

Administrative/Salary/Overhead: phone
system, digital camera, postage water, half &
half office

Mailing Address 325 Celia Drive

City

State

Zip Code

Wolcott

CT

06705-3153

Outstanding Balance Beginning This Period

5050.55

Transaction ID : SD10-DEBT3934

Amount Incurred This Period

1050.51

Payment This Period

4500

Outstanding Balance at Close of This Period

1601.06

1) **SUBTOTALS** This Period This Page (optional) ▶

4045.72

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 51 OF 56

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

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

Dey Smith Steele, LLC

Nature of Debt (Purpose):

Administrative/Salary/Overhead: legal fees

Mailing Address 9 Depot Street
Floor 2City State Zip Code
Milford CT 06460-3357

Outstanding Balance Beginning This Period

29493.75

Transaction ID : SD10-DEBT3957

Amount Incurred This Period

213.85

Payment This Period

0

Outstanding Balance at Close of This Period

29707.6

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

American Copy Service Center, Inc.

Nature of Debt (Purpose):

Administrative/Salary/Overhead: copying

Mailing Address 2095 S Main Street

City State Zip Code
Waterbury CT 06706-2029

Outstanding Balance Beginning This Period

19.56

Transaction ID : SD10-DEBT3956

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

19.56

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

Watertown Main Street LLC

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Office Rent

Mailing Address PO Box 28

City State Zip Code
Watertown CT 06795-0028

Outstanding Balance Beginning This Period

2500

Transaction ID : SD10-DEBT3906

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

2500

1) **SUBTOTALS** This Period This Page (optional) ▶

32227.16

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 52 OF 56

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

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

Frontier Communications

Nature of Debt (Purpose):

Administrative/Salary/Overhead: internet

Mailing Address PO Box 20550

City State

Zip Code

Rochester

NY

14602-0550

Outstanding Balance Beginning This Period

0

Transaction ID : SD10-DEBT3950

Amount Incurred This Period

75

Payment This Period

0

Outstanding Balance at Close of This Period

75

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

William J Evans

Nature of Debt (Purpose):

Advertising: direct mail advertising

Mailing Address 325 Celia Drive

City State

Zip Code

Wolcott

CT

06705-3153

Outstanding Balance Beginning This Period

0

Transaction ID : SD10-DEBT3939

Amount Incurred This Period

2023.91

Payment This Period

0

Outstanding Balance at Close of This Period

2023.91

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

American Copy Service Center, Inc.

Nature of Debt (Purpose):

Advertising: copy service

Mailing Address 2095 S Main Street

City

State

Zip Code

Waterbury

CT

06706-2029

Outstanding Balance Beginning This Period

192.78

Transaction ID : SD10-DEBT3898

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

192.78

1) **SUBTOTALS** This Period This Page (optional) ▶

2291.69

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 53 OF 56

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

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

Jamestown Associates

Nature of Debt (Purpose):

Advertising: broadcast TV Advertising

Mailing Address 5 Mapleton Road
Suite 300City State Zip Code
Princeton NJ 08540-9646

Outstanding Balance Beginning This Period

1275

Transaction ID : SD10-DEBT3897

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

1275

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

Red Maverick Media, LLC

Nature of Debt (Purpose):

Advertising: direct mail advertising design fee

Mailing Address 403 N 2nd Street
Suite 2City State Zip Code
Harrisburg PA 17101-1377

Outstanding Balance Beginning This Period

200

Transaction ID : SD10-DEBT3896

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

200

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

David Derwin

Nature of Debt (Purpose):

Advertising: production costs TV ad

Mailing Address 1313 Grand Street
Apt. 205City State Zip Code
Hoboken NJ 07030-2252

Outstanding Balance Beginning This Period

1500

Transaction ID : SD10-DEBT3731

Amount Incurred This Period

0

Payment This Period

1500

Outstanding Balance at Close of This Period

0

1) **SUBTOTALS** This Period This Page (optional) ▶

1475.00

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 54 OF 56

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

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

J. Kenneth Nowell

Nature of Debt (Purpose):

Campaign Event: event supplies, facility rental,
catering, beverages

Mailing Address 53 Peck Road

City State

Zip Code

Torrington

CT

06790-6106

Outstanding Balance Beginning This Period

4442.9

Transaction ID : SD10-DEBT3914

Amount Incurred This Period

0

Payment This Period

4442.9

Outstanding Balance at Close of This Period

0

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

Watertown Golf Club

Nature of Debt (Purpose):

Campaign Event: golf tournament expenses

Mailing Address 246 Guernseytown Road

City State

Zip Code

Watertown

CT

06795-1819

Outstanding Balance Beginning This Period

6804.05

Transaction ID : SD10-DEBT3945

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

6804.05

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

VoterTrove, Inc.

Nature of Debt (Purpose):

Campaign Event: Get Out Our Vote

Mailing Address 921 Cavalry Ride Trail

City

State

Zip Code

Austin

TX

78732-2370

Outstanding Balance Beginning This Period

3727.22

Transaction ID : SD10-DEBT3942

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

3727.22

1) **SUBTOTALS** This Period This Page (optional) ▶

10531.27

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 55 OF 56

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

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

KB Strategic Group

Nature of Debt (Purpose):

Fundraising: fundraising consultant

Mailing Address PO Box 101682

City State

Zip Code

Arlington

VA

22210-4682

Outstanding Balance Beginning This Period

1850

Transaction ID : SD10-DEBT3904

Amount Incurred This Period

0

Payment This Period

1850

Outstanding Balance at Close of This Period

0

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

Arrow Printers, Inc.

Nature of Debt (Purpose):

Paraphernalia: signs

Mailing Address 311 Main Street

City State

Zip Code

Ansonia

CT

06401-2301

Outstanding Balance Beginning This Period

358.93

Transaction ID : SD10-DEBT3925

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

358.93

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

William J Evans

Nature of Debt (Purpose):

Paraphernalia: sign materials

Mailing Address 325 Celia Drive

City

State

Zip Code

Wolcott

CT

06705-3153

Outstanding Balance Beginning This Period

237.65

Transaction ID : SD10-DEBT3935

Amount Incurred This Period

613.17

Payment This Period

0

Outstanding Balance at Close of This Period

850.82

1) **SUBTOTALS** This Period This Page (optional) ▶

1209.75

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 56 OF 56

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

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

William J Evans

Nature of Debt (Purpose):

Travel: Gas, meals and catering

Mailing Address 325 Celia Drive

City State

Zip Code

Wolcott

CT

06705-3153

Outstanding Balance Beginning This Period

2147.05

Transaction ID : SD10-DEBT3936

Amount Incurred This Period

509.84

Payment This Period

0

Outstanding Balance at Close of This Period

2656.89

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

Maeve McHugh

Nature of Debt (Purpose):

Travel: Mileage reimbursement

Mailing Address PO Box 507

City State

Zip Code

Niantic

CT

06357-0507

Outstanding Balance Beginning This Period

78.85

Transaction ID : SD10-DEBT3905

Amount Incurred This Period

0

Payment This Period

78.85

Outstanding Balance at Close of This Period

0

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

2656.89

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

94781.31

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

1811500.00

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

1906281.31