

**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

01 / 01 / 2013

through

M M / D D / Y Y Y Y

03 / 31 / 2013

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 / 15 / 2013

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)

Write or Type Committee Name

**Mark Greenberg for Congress**

Report Covering the Period:

From:

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

To:

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

	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))....	59000	69000
(b) Total Contribution Refunds (from Line 20(d)) .....	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	59000	69000
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	58461.92	66448.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	58461.92	66448.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	851.08	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	472975.92	

**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 / 24

Write or Type Committee Name

Mark Greenberg for Congress

Report Covering the Period:

From:

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

To:

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

**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

277261.68

(ii) Unitemized.....

0

-277261.68

(iii) TOTAL of contributions from individuals ▶

0

0

(b) Political Party Committees.....

0

0

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

0

0

(d) The Candidate.....

59000

69000

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

59000

69000

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

0

0

**13. LOANS:**

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

0

0

(b) All Other Loans.....

0

0

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

0

0

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

0

0

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

0

0

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

59000

69000

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 24

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	58461.92	66448.89
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(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	0
21. OTHER DISBURSEMENTS .....	0	0
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	58461.92	66448.89

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	313
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	59000
25. SUBTOTAL (add Line 23 and Line 24).....	59313
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	58461.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	851.08

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 24

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15  
12 13a 13b 14

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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: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1841390

Date of Receipt

**01** / **31** / **2013**

**Transaction ID : A-C2059**

Amount of Each Receipt this Period

1500

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: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1841390

Date of Receipt

**02** / **13** / **2013**

**Transaction ID : A-C2060**

Amount of Each Receipt this Period

2500

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: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1841390

Date of Receipt

**03** / **08** / **2013**

**Transaction ID : A-C2069**

Amount of Each Receipt this Period

25000

contribution

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

29000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 24

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15  
12 13a 13b 14

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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: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1841390

Date of Receipt

M M / D D / Y Y Y Y  
03 / 29 / 2013

Transaction ID : A-C2070

Amount of Each Receipt this Period

30000

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

30000.00

59000.00

**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 24

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

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. FP1 Strategies, LLC**

Mailing Address PO Box 16504

City	State	Zip Code
Alexandria	VA	22302-0154

Purpose of Disbursement  
Television and Radio Advertisi

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2013

Amount of Each Disbursement this Period

5000
------

Transaction ID : B-E-2045

**B. Dey Smith Steele, LLC**Mailing Address 9 Depot Street  
Floor 2

City	State	Zip Code
Milford	CT	06460-3357

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2013

Amount of Each Disbursement this Period

900
-----

Transaction ID : B-E-2050

**c. United States Treasury**

Mailing Address PO Box 804521

City	State	Zip Code
Cincinnati	OH	45280-4521

Purpose of Disbursement  
Additional FUTA

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2013

Amount of Each Disbursement this Period

549.54
--------

Transaction ID : B-E-2051

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

6449.54

**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 24

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

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Theroux, Nowell & Stoughton, LLC**

Mailing Address 53 Peck Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2013

City	State	Zip Code
Torrington	CT	06790-6106

Amount of Each Disbursement this Period

500
-----

Purpose of Disbursement  
accounting services

001

Transaction ID : B-E-2057

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Brian Hamel**

Mailing Address 73 Sunset Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2013

City	State	Zip Code
Oakville	CT	06779-2111

Amount of Each Disbursement this Period

428.75
--------

Purpose of Disbursement  
political staff wages

001

Transaction ID : B-E-2058

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Dey Smith Steele, LLC**Mailing Address 9 Depot Street  
Floor 2

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2013

City	State	Zip Code
Milford	CT	06460-3357

Amount of Each Disbursement this Period

3900
------

Purpose of Disbursement  
legal fees

001

Transaction ID : B-E-2054

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

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

4828.75

**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 9 OF 24

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

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Dey Smith Steele, LLC**Mailing Address 9 Depot Street  
Floor 2

City Milford State CT Zip Code 06460-3357

Purpose of Disbursement  
legal fees

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2013

Amount of Each Disbursement this Period

1500
------

Transaction ID : B-E-2055

**B. Dey Smith Steele, LLC**Mailing Address 9 Depot Street  
Floor 2

City Milford State CT Zip Code 06460-3357

Purpose of Disbursement  
legal fees

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2013

Amount of Each Disbursement this Period

525
-----

Transaction ID : B-E-2062

**c. FP1 Strategies, LLC**

Mailing Address PO Box 16504

City Alexandria State VA Zip Code 22302-0154

Purpose of Disbursement  
Television and Radio Advertisi

004

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2013

Amount of Each Disbursement this Period

16250
-------

Transaction ID : B-E-2061

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

18275.00

**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 10 OF 24

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

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Theroux, Nowell & Stoughton, LLC**

Mailing Address 53 Peck Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2013

City	State	Zip Code
Torrington	CT	06790-6106

Amount of Each Disbursement this Period

2800
------

Purpose of Disbursement  
accounting services

001

Transaction ID : B-E-2063

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Avenue SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2013

City	State	Zip Code
Washington	DC	20003-1164

Amount of Each Disbursement this Period

1600
------

Purpose of Disbursement  
Administrative/Salary/Overhead: software

001

Transaction ID : B-E-2064

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Brian Hamel**

Mailing Address 73 Sunset Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2013

City	State	Zip Code
Oakville	CT	06779-2111

Amount of Each Disbursement this Period

408.75
--------

Purpose of Disbursement  
Political Staff Wages

001

Transaction ID : B-E-2065

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

4808.75

**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 11 OF 24

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

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. Cooper Communications LLC**

Mailing Address 77 Ripley Hill Road

City	State	Zip Code
Coventry	CT	06238-1631

Purpose of Disbursement  
Public Relations Consultant

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2013

Amount of Each Disbursement this Period

7125.45

Transaction ID : B-E-1996

**B. Meridian Central Public Affairs, LLC**

Mailing Address 2937 S 120th Street

City	State	Zip Code
Omaha	NE	68144-4310

Purpose of Disbursement  
Campaign Event: automated teleforum

007

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2013

Amount of Each Disbursement this Period

597.49

Transaction ID : B-E-1949

**c. Meridian Central Public Affairs, LLC**

Mailing Address 2937 S 120th Street

City	State	Zip Code
Omaha	NE	68144-4310

Purpose of Disbursement  
Campaign Event: automated teleforum

007

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2013

Amount of Each Disbursement this Period

287.6

Transaction ID : B-E-1950

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

8010.54

**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 12 OF 24

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

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Meridian Central Public Affairs, LLC**

Mailing Address 2937 S 120th Street

City	State	Zip Code
Omaha	NE	68144-4310

Purpose of Disbursement  
Campaign Event: automated teleforum

007

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2013

Amount of Each Disbursement this Period

915.1
-------

Transaction ID : B-E-1951

**B. Meridian Central Public Affairs, LLC**

Mailing Address 2937 S 120th Street

City	State	Zip Code
Omaha	NE	68144-4310

Purpose of Disbursement  
Campaign Event: automated teleforum

007

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2013

Amount of Each Disbursement this Period

670.57
--------

Transaction ID : B-E-1952

**C. Meridian Central Public Affairs, LLC**

Mailing Address 2937 S 120th Street

City	State	Zip Code
Omaha	NE	68144-4310

Purpose of Disbursement  
Travel: reimburse travel expenses

002

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2013

Amount of Each Disbursement this Period

2031.76
---------

Transaction ID : B-E-1978

Original vendors exceeding reporting threshold itemized  
as memo transactions.

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

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

3617.43



**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 14 OF 24

<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. Delta Airlines**

Mailing Address PO Box 20706

City	State	Zip Code
Atlanta	GA	30320-6001

Purpose of Disbursement  
airfare

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2012

Amount of Each Disbursement this Period

829.9
-------

Transaction ID : B-S-119

**[MEMO ITEM]**

Subitemization of Meridian Central Public Affairs, LLC(03/29/13)

**B. Hertz Rent-a-Car**

Mailing Address 2 Schoephoester Road

City	State	Zip Code
Windsor Locks	CT	06096-1023

Purpose of Disbursement  
rental car

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2012

Amount of Each Disbursement this Period

506.14
--------

Transaction ID : B-S-120

**[MEMO ITEM]**

Subitemization of Meridian Central Public Affairs, LLC(03/29/13)

**c. Hampton Inn**

Mailing Address 2168 Poquonock Avenue

City	State	Zip Code
Windsor	CT	06095-1238

Purpose of Disbursement  
lodging

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2012

Amount of Each Disbursement this Period

501.4
-------

Transaction ID : B-S-121

**[MEMO ITEM]**

Subitemization of Meridian Central Public Affairs, LLC(03/29/13)

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

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

0.00
------

**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 15 OF 24

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

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Meridian Central Public Affairs, LLC**

Mailing Address 2937 S 120th Street

City	State	Zip Code
Omaha	NE	68144-4310

Purpose of Disbursement  
Conference Calls Reimbursed

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2013

Amount of Each Disbursement this Period

109.41
--------

Transaction ID : B-E-2003

Full Name (Last, First, Middle Initial)

**B. Public Opinion Strategies, LLC**

Mailing Address 214 N Fayette Street

City	State	Zip Code
Alexandria	VA	22314-2433

Purpose of Disbursement  
Polling: survey of voters

005

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2013

Amount of Each Disbursement this Period

4000
------

Transaction ID : B-E-1893

Full Name (Last, First, Middle Initial)

**C. Theroux, Nowell & Stoughton, LLC**

Mailing Address 53 Peck Road

City	State	Zip Code
Torrington	CT	06790-6106

Purpose of Disbursement  
accounting services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2013

Amount of Each Disbursement this Period

1687.5
--------

Transaction ID : B-E-1997

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

5796.91

**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 16 OF 24

<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. Theroux, Nowell & Stoughton, LLC**

Mailing Address 53 Peck Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2013

City	State	Zip Code
Torrington	CT	06790-6106

Purpose of Disbursement  
Accounting serviceds

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

4675
------

Transaction ID : B-E-2039

Full Name (Last, First, Middle Initial)

**B. Theroux, Nowell & Stoughton, LLC**

Mailing Address 53 Peck Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2013

City	State	Zip Code
Torrington	CT	06790-6106

Purpose of Disbursement  
accounting services

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

2000
------

Transaction ID : B-E-2056

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

--

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

6675.00

58461.92

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

PAGE 17 OF 24

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

0

215000

**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  
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)..... ►

215000.00

**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 24

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

0

80000

**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  
/ / /M M / D D / Y Y Y Y  
/ / /M M / D D / Y Y Y Y  
None / / /M M / D D / Y Y 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)..... ►

80000.00

**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 24

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 20 OF 24

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)..... ►

465000.00

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 21 OF 24

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

**Meridian Central Public Affairs, LLC**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Conference  
Calls Reimbursed

Mailing Address 2937 S 120th Street

City State

Zip Code

Omaha

NE

68144-4310

Outstanding Balance Beginning This Period

109.41

Transaction ID : SD10-DEBT2003

Amount Incurred This Period

0

Payment This Period

109.41

Outstanding Balance at Close of This Period

0

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

**Theroux, Nowell & Stoughton, LLC**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: accounting  
services

Mailing Address 53 Peck Road

City State

Zip Code

Torrington

CT

06790-6106

Outstanding Balance Beginning This Period

9662.5

Transaction ID : SD10-DEBT2063

Amount Incurred This Period

0

Payment This Period

9662.5

Outstanding Balance at Close of This Period

0

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

7125.45

Transaction ID : SD10-DEBT1996

Amount Incurred This Period

0

Payment This Period

7125.45

Outstanding Balance at Close of This Period

0

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

0.00

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 22 OF 24

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: Additional  
FUTA

Mailing Address PO Box 804521

City State

Zip Code

Cincinnati

OH

45280-4521

Outstanding Balance Beginning This Period

549.54

Transaction ID : SD10-DEBT2051

Amount Incurred This Period

0

Payment This Period

549.54

Outstanding Balance at Close of This Period

0

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

**Union Square Southbury, LLC**

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Rent  
headquarters

Mailing Address PO Box 136

City State

Zip Code

Goshen

CT

06756-0136

Outstanding Balance Beginning This Period

2500

Transaction ID : SD10-DEBT1992

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

2500

C. 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 2

City

State

Zip Code

Milford

CT

06460-3357

Outstanding Balance Beginning This Period

900

Transaction ID : SD10-DEBT2050

Amount Incurred This Period

0

Payment This Period

900

Outstanding Balance at Close of This Period

0

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

2500.00

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 23 OF 24

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

**FP1 Strategies, LLC**

Nature of Debt (Purpose):

Advertising: Television and Radio Advertising  
Production Listen

Mailing Address PO Box 16504

City State

Zip Code

Alexandria

VA

22302-0154

Outstanding Balance Beginning This Period

21250

Transaction ID : SD10-DEBT2061

Amount Incurred This Period

0

Payment This Period

21250

Outstanding Balance at Close of This Period

0

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

**Meridian Central Public Affairs, LLC**

Nature of Debt (Purpose):

Campaign Event: automated teleforum

Mailing Address 2937 S 120th Street

City State

Zip Code

Omaha

NE

68144-4310

Outstanding Balance Beginning This Period

2470.76

Transaction ID : SD10-DEBT1952

Amount Incurred This Period

0

Payment This Period

2470.76

Outstanding Balance at Close of This Period

0

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

**Clearwater of Litchfield, LLC**

Nature of Debt (Purpose):

Paraphernalia: remove campaign signs

Mailing Address 184 Fern Avenue

City

State

Zip Code

Litchfield

CT

06759-2721

Outstanding Balance Beginning This Period

5475.92

Transaction ID : SD10-DEBT1998

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

5475.92

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

5475.92

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 24 OF 24

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

**Public Opinion Strategies, LLC**

Nature of Debt (Purpose):

Polling: survey of voters

Mailing Address 214 N Fayette Street

City State

Zip Code

Alexandria

VA

22314-2433

Outstanding Balance Beginning This Period

4000

Transaction ID : SD10-DEBT1893

Amount Incurred This Period

0

Payment This Period

4000

Outstanding Balance at Close of This Period

0

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

**Meridian Central Public Affairs, LLC**

Nature of Debt (Purpose):

Travel: reimburse travel expenses

Mailing Address 2937 S 120th Street

City State

Zip Code

Omaha

NE

68144-4310

Outstanding Balance Beginning This Period

2031.76

Transaction ID : SD10-DEBT1978

Amount Incurred This Period

0

Payment This Period

2031.76

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) ..... ▶

0.00

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

7975.92

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

465000.00

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

472975.92