

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

Name of committee (in full) ROMNEY FOR PRESIDENT, INC.		Report Covering the Period From: 07/01/2010 To: 09/30/2010	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00	
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	0.00	301.67	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	0.00	0.00	
(d) The Candidate	0.00	52500.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	0.00	52801.67	
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00	
(b) Other Loans	0.00	0.00	
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00	
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	138.78	48091.42	
(b) Fundraising	0.00	0.00	
(c) Legal and Accounting	0.00	0.00	
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	138.78	48091.42	
21. OTHER RECEIPTS (Dividend, Interest, etc.)	0.00	127543.57	
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	138.78	228436.66	
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	3941.08	271994.37	
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	
25. FUNDRAISING DISBURSEMENTS	0.00	0.00	
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	0.00	0.00	
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	0.00	0.00	
(b) Other Repayments	0.00	0.00	
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	0.00	
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	0.00	-211755.33	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	0.00	-300.00	
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	0.00	-212055.33	
29. OTHER DISBURSEMENTS	0.00	172836.00	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	3941.08	232775.04	
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00		

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 29
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

ROMNEY FOR PRESIDENT, INC.

ADDRESS (number and street)

80 HAYDEN AVENUE

CITY, STATE, and ZIP CODE

LEXINGTON

MA

02421

2. IDENTIFICATION NUMBER

C00431171

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	0.00

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4 / 29
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Date of Receipt MM / DD / YYYY 07 / 27 / 2010
	Mailing Address PO Box 2167	Amount of Each Receipt this Period 138.78
	City State Zip Code Folsom CA 95763-2167	
	FEC ID number of contributing federal political committee.	Refund - Phone Service
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 174.76
		Transaction ID: 1

SUBTOTAL of Receipts This Page (optional)	▶	138.78
TOTAL This Period (last page this line number only)	▶	138.78

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Hui JoJo Deng	Transaction ID: 08 Date of Disbursement
	Mailing Address 117 Beaconsfield Road	<input type="text" value="07"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Brookline State MA Zip Code 02445	Amount of Each Disbursement this Period
	Purpose of Disbursement Compliance Consulting	<input type="text" value="90.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bruce Nilson	Transaction ID: 01 Date of Disbursement
	Mailing Address 40 Kings Way # 401A	<input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Waltham State MA Zip Code 02451	Amount of Each Disbursement this Period
	Purpose of Disbursement Compliance Consulting	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bruce Nilson	Transaction ID: 09 Date of Disbursement
	Mailing Address 40 Kings Way # 401A	<input type="text" value="08"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Waltham State MA Zip Code 02451	Amount of Each Disbursement this Period
	Purpose of Disbursement Compliance Consulting	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1090.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Bruce Nilson Mailing Address 40 Kings Way # 401A City Waltham State MA Zip Code 02451 Purpose of Disbursement Compliance Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 14 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0 Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) CMDI Mailing Address 7704 Leesburg Pike City Falls Church State VA Zip Code 22043 Purpose of Disbursement Data Management Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 02 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 1 0 Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Iron Mountain Mailing Address PO Box 27128 City New York State NY Zip Code 10087 Purpose of Disbursement File Storage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 03 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 1 0 Amount of Each Disbursement this Period 200.63

SUBTOTAL of Disbursements This Page (optional) ▶

1200.63

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Iron Mountain</p> <p>Mailing Address PO Box 27128</p> <p>City New York State NY Zip Code 10087</p> <p>Purpose of Disbursement File Storage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 15</p> <p>Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 453.76</p> <p>Category/Type</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Lockart, Atchley & Associates, LLP</p> <p>Mailing Address 6850 Austin Center BLVD Suite 180</p> <p>City Austin State TX Zip Code 78731</p> <p>Purpose of Disbursement Tax Preparation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 05</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 228.80</p> <p>Category/Type</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mar Lexhay, LLC</p> <p>Mailing Address C/O Free Strong America PAC 80 Hayden Avenue</p> <p>City Lexington State MA Zip Code 02421</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 06</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 134.10</p> <p>Category/Type</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional) ▶

816.66

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Mar Lexhay, LLC <hr/> Mailing Address C/O Free Strong America PAC 80 Hayden Avenue <hr/> City Lexington State MA Zip Code 02421 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10 Date of Disbursement 08 / 27 / 2010 <hr/> Amount of Each Disbursement this Period 142.65
B.	Full Name (Last, First, Middle Initial) Patton Boggs LLP <hr/> Mailing Address 2550 M ST N.W. <hr/> City Washington State DC Zip Code 20037 <hr/> Purpose of Disbursement Legal Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 11 Date of Disbursement 08 / 27 / 2010 <hr/> Amount of Each Disbursement this Period 110.00
C.	Full Name (Last, First, Middle Initial) Red Curve Solutions <hr/> Mailing Address 900 Cummings Center Suite 211U <hr/> City Beverly State MA Zip Code 01915 <hr/> Purpose of Disbursement Compliance Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 12 Date of Disbursement 08 / 27 / 2010 <hr/> Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶

752.65

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) Spelna Inc	Transaction ID: 07 Date of Disbursement
	Mailing Address 225 Industrial Court	<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City Fredericksburg State VA Zip Code 22408	Amount of Each Disbursement this Period
	Purpose of Disbursement File Storage	<input type="text" value="18.22"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Spelna Inc	Transaction ID: 13 Date of Disbursement
	Mailing Address 225 Industrial Court	<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Fredericksburg State VA Zip Code 22408	Amount of Each Disbursement this Period
	Purpose of Disbursement File Storage	<input type="text" value="35.64"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Town of Lexington	Transaction ID: 04 Date of Disbursement
	Mailing Address PO Box 309	<input type="text" value="07"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Lexington State MA Zip Code 02420	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes	<input type="text" value="27.28"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="81.14"/>
TOTAL This Period (last page this line number only)	<input type="text" value="3941.08"/>

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 10 / 29
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
 ROMNEY FOR PRESIDENT, INC.

Transaction ID: M3C-1

LOAN SOURCE Full Name (Last, First, Middle Initial) GOLDMAN SACHS & CO.- SECURED BY PERSONAL ASSETS OF CANDIDATE	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 85 BROAD STREET	
City NEW YORK State NY ZIP Code 10004	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000000.00	2000000.00	0.00

TERMS

Date Incurred M M 0 2 D D 0 4 Y Y Y Y 2 0 0 8	Date Due 12/31/2008	Interest Rate 0.0000 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--	------------------------	---------------------------------	---

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

A. Form/Schedule : **SC/12**
Transaction ID : **M3C-1**

SCHEDULE C - GOLDMAN SACHS LINE OF CREDIT Interest rate is Prime + 1.0% Line of credit is secured by personal assets of candidate held at Goldman Sachs.

Schedule C-P

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 12 / 29
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 19a <input type="checkbox"/> 19b

LOANS

NAME OF COMMITTEE (In Full)
 ROMNEY FOR PRESIDENT, INC. Transaction ID: SC.02

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY- CONVERTED TO CONTRIBUT - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500000.00	1500000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 2 D D 2 2 Y Y Y Y 2 0 0 6	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
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-P

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

PAGE 13 / 29

FOR LINE NUMBER: (check only one) 19a 19b

LOANS

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-M608

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONV. \$2,050k TO CONTRI - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2300000.00	2050000.00	250000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YYYY 05 15 2008	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	250000.00
TOTALS This Period (last page in this line only)	<input type="text"/>

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-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC.01

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONV. \$805k TO CONTRIBU - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
850000.00	850000.00	0.00

TERMS

Date Incurred: MM DD YY Y Y Y Y Secured: Yes No
 10 25 2006 12/31/2008 0.0000 % (apr)

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

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-P

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 15 / 29
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 19a <input type="checkbox"/> 19b

LOANS

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-08

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000000.00	3000000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 1 D D 1 5 Y Y Y Y 2 0 0 7	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
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-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-09

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSON-
AL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000000.00	3000000.00	0.00

TERMS

Date Incurred: MM DD YY YY 11 28 2007
Date Due: 12/31/2008
Interest Rate: 0.0000 % (apr)
Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
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-P

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 17 / 29
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 19a <input type="checkbox"/> 19b

LOANS

NAME OF COMMITTEE (In Full)
 ROMNEY FOR PRESIDENT, INC. Transaction ID: SC.03

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2500000.00	2500000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 05 D D 11 Y Y Y Y 2007	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	0.00
TOTALS This Period (last page in this line only)	<input type="text"/>

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-P

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 19 / 29
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 19a <input type="checkbox"/> 19b

LOANS

NAME OF COMMITTEE (In Full)
 ROMNEY FOR PRESIDENT, INC. **Transaction ID: SC-05**

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3500000.00	3500000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 09 D D 10 Y Y Y Y 2007	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
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-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 20 / 29 FOR LINE NUMBER: (check only one) <table style="margin-left: 20px;"> <tr> <td><input checked="" type="checkbox"/></td> <td>19a</td> </tr> <tr> <td><input type="checkbox"/></td> <td>19b</td> </tr> </table>	<input checked="" type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input checked="" type="checkbox"/>	19a				
<input type="checkbox"/>	19b				

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-06

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000000.00	5000000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:						
<table style="font-size: small;"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>0 9</td> <td>2 8</td> <td>2 0 0 7</td> </tr> </table>	M M	D D	Y Y Y Y	0 9	2 8	2 0 0 7	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M M	D D	Y Y Y Y							
0 9	2 8	2 0 0 7							

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional) ▶	<input style="width: 100%; height: 20px;" type="text" value="0.00"/>
TOTALS This Period (last page in this line only) ▶	<input style="width: 100%; height: 20px;" type="text"/>
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-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-07

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000000.00	3000000.00	0.00

TERMS

Date Incurred Date Due Interest Rate % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

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-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-10

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSON-
AL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000000.00	3000000.00	0.00

TERMS

Date Incurred Date Due Interest Rate % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

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-P

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 23 / 29
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 19a <input type="checkbox"/> 19b

LOANS

NAME OF COMMITTEE (In Full)
 ROMNEY FOR PRESIDENT, INC. Transaction ID: SC-11

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000000.00	3000000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 2 D D 1 8 Y Y Y Y 2 0 0 7	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	0.00
TOTALS This Period (last page in this line only)	<input type="text"/>
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-P

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 25 / 29
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 19a <input type="checkbox"/> 19b

LOANS

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-001

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4650000.00	4650000.00	0.00

TERMS

Date Incurred MM DD YY YY 01 02 2008	Date Due 12/31/2008	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	------------------------	---------------------------------	---

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

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-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-02

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSON-
AL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1600000.00	1600000.00	0.00

TERMS

Date Incurred Date Due Interest Rate % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

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-P

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 27 / 29
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 19a <input type="checkbox"/> 19b

LOANS

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-03

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
450000.00	450000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 0 1 D D 2 2 Y Y Y Y 2 0 0 8	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
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-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-04

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSON-
AL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	250000.00	0.00

TERMS

Date Incurred Date Due Interest Rate % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value="250000.00"/>

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

SCHEDULE C-P-1 LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

 Supplementary for
 Information found on
 Page 29 / 29 of Schedule C

Name of Committee (in Full) ROMNEY FOR PRESIDENT, INC.		FEC IDENTIFICATION NUMBER C00431171	
Back Ref ID: M3C-1			
LENDING INSTITUTION (LENDER) Full Name GOLDMAN SACHS & CO.		Amount of Loan 2000000.00	Interest Rate (APR) 0.00000 %
Mailing Address 85 BROAD STREET		Date Incurred or Established 02 04 2008	
City NEW YORK	State NY	Zip Code 10004	Date Due 12/31/2008
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred :			
B. If line of credit, Amount of this Draw: 0.00		Total Outstanding balance : 0.00	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>PERSONAL ASSETS OF CANDIDATE HELD AT GOLDMAN SACHS</u>		What is the value of this collateral? 2000000.00 Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify:		What is the estimated value? 0.00	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established:		Location of account Address: City, State, Zip:	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name DARRELL CRATE Signature		DATE 02 04 2008	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name JIM DONOVAN Signature		DATE 02 04 2008	
		Title Managing Director	