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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For An A	uthori	zed Com	mittee			Office Us	se Only	
NAME OF COMMITTEE (in		TYPE OR PRIN	Γ ▼		ample: If typin er the lines.	g, type	12FE4M5)		
Mark Greenbe	rg for Co	ngress								1
<u> </u>										
		53 Peck Rd								
ADDRESS (number ar	nd street)	oo i ook ita								
Check if dif	ferent									
than previous reported. (A		Torrington					CT	06790-61	06	
2. FEC IDENTIFIC	CATION NU	MBER ▼		CITY			STATE		ZIP CODE A	NETDICT
C C0049339	95			S THIS REPORT	NEW (N)	OR	× AMENE (A)	DED	JAIL V L	05
		ı								
4. TYPE OF RE	·	ose One)	(b) 1	2-Day PRE	-Election Repo	rt for the:				
(a) Quarterly R	eports:			П	Primary (12P)	,	General (12G)	Runof	f (12R)
April 15	Quarterly R	eport (Q1)								, ,
July 15	Quarterly Re	eport (Q2)			Convention (120)	Special (1	23)		
Octobe	r 15 Quarter	y Report (Q3)	ı	Election on	M M /	D D	YYYY		in the State of	
× January	/ 31 Year-En	d Report (YE)	(c) 3	0-Day POS	T -Election Rep	ort for the	::			
					General (30G)	Runoff (30	OR)	Specia	al (30S)
Termina	tion Report	(TER)	I	Election on	M M /	D D	YYYY		in the State of	
5. Covering Period	M 10	M / D D /)15 Y	through	M 12	31	Y Y 20	15	
I certify that I have e	examined thi	s Report and to	the be	st of my kn	owledge and l	belief it is	true, correct and	d comple	ete.	
Type or Print Name	of Treasurer	J. Kenneth No	owell							
Signature of Treasure	er <u>J. Ke</u>	nneth Nowell			[Electronically 1	Filed]	Date 01	/ D		016 Y
NOTE: Submission of	false, errone	ous, or incomple	ete inforr	mation may	subject the per	son signing	this Report to t	he penali	ties of 2 U.S.C	. §437g.
Office Use								FE	C FORM (3
Only									vised 02/2003)	′

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 54

Write or Type Committee Name

Mark Greenberg for Congress

10 12 31 2015 01 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 17500.00 500579.86 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 22206.11 (from Line 20(d)) (c) Net Contributions (other than loans) 17500.00 478373.75 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 17282.89 1840331.81 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 17282.89 1840331.81 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of -76.73 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 1838784.25 Schedule C and/or Schedule D).....

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 / 54

Write or Type Committee Name

Mark Greenberg for Congress

Report Covering the Period: From: 10 01 2015 To: 12 31 2015

	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)	0.00	263631.11
	(ii) Unitemized	0.00	30568.75
	(iii) TOTAL of contributions from individuals	0.00	294199.86
	(b) Political Party Committees	0.00	5500.00
	(c) Other Political Committees (such as PACs)	0.00	26500.00
	(d) The Candidate(e) TOTAL CONTRIBUTIONS	17500.00	174380.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	17500.00	500579.86
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	1642900.00
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	1642900.00
	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	1408.36
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	17500.00	2144888.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17.	OPERATING EXPENDITURES	17282.89	1840331.81	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	
19.	LOAN REPAYMENTS:			
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	280000.00	
	(b) Of All Other Loans	0.00	0.00	
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	280000.00	
20.	REFUNDS OF CONTRIBUTIONS TO:			
	(a) Individuals/Persons Other Than Political Committees	0.00	22206.11	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	22206.11	
1.	OTHER DISBURSEMENTS	727.00	727.00	
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	18009.89	2143264.92	
	III. CASH S	UMMARY		
3.	CASH ON HAND AT BEGINNING OF REPO	DRTING PERIOD	433.16	
4	4 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)			
5.	SUBTOTAL (add Line 23 and Line 24)		17933.16	
6.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	18009.89	
	CASH ON HAND AT CLOSE OF REPORTIN		-76.73	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 5 OF 54 Use separate schedule(s) (check only one) for each category of the X 11d 11a 11b 11c Detailed Summary Page 12 13a 13b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Mark Greenberg for Congress Full Name (Last, First, Middle Initial) Mark Greenberg Date of Receipt Mailing Address 184 Fern Ave 23 2015 City State Zip Code Transaction ID: A827215837DD346A6998 CT 06759-2721 Litchfield FEC ID number of contributing Amount of Each Receipt this Period H0CT05150 federal political committee. 10000.00 Name of Employer Occupation Campaign Contribution Mark Greenberg Real Estate Real Estate Developer Receipt For: 2014 Election Cycle-to-Date Primary X General 105350.00 Other (specify) Full Name (Last, First, Middle Initial) Mark Greenberg Date of Receipt Mailing Address 184 Fern Ave 28 2015 City State Zip Code Transaction ID: A0C66856C260C4BA7A85 Litchfield CT 06759-2721 FEC ID number of contributing Amount of Each Receipt this Period С H0CT05150 federal political committee. 7500.00 Name of Employer Occupation Real Estate Developer campaign contribution Mark Greenberg Real Estate Receipt For: 2014 Election Cycle-to-Date Primary ✓ General 95350.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 17500.00 SUBTOTAL of Receipts This Page (optional)..... 17500.00

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

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	I		DR LINE NUMBER: PAGE 6 OF 54 heck only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress	, ,		
Full Name (Last, First, Middle Initial) Theroux, Nowell & Stoughton, LLC Mailing Address 53 Peck Road			Date of Disbursement 10 28 2015
City State	Zip Code		Amount of Each Disbursement this Period
Torrington CT Purpose of Disbursement	06790-6106		3000.00
Debt Repayment: accounting and software		001	Transaction ID : B86AAA8ACCD7643AB971
Candidate Name		Category/ Type	
State: District: Full Name (Last, First, Middle Initial)			
Mailing Address 77 Ripley Hill Road			Date of Disbursement 10 28 2015
City State	Zip Code		Amount of Each Disbursement this Period
Coventry CT Purpose of Disbursement	06238-1631		943.50
Debt Repayment: Public relations consultant Candidate Name		001 Category/ Type	Transaction ID : B0BEBB0AEE74843FB8C0
Office Sought: House Disbursement F			
Full Name (Last, First, Middle Initial)			
Cooper Communications LLC			Date of Disbursement
Mailing Address 77 Ripley Hill Road			10 28 2015
City State Coventry CT	Zip Code 06238-1631		Amount of Each Disbursement this Period
Purpose of Disbursement	00230-1031		56.50
Debt Repayment: Public Relations Consultant Candidate Name		001 Category/ Type	Transaction ID : B4D8AEBBF59814DCD9F3
Office Sought: House Disbursement F			

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

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

4000.00

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	CHEDULE B (FEC EMIZED DISBURSE	•	Use separate so for each categor Detailed Summa	hedule(s) (d ry of the	FOR LINE NUMBER: PAGE 7 OF 54 check only one) X 17
	for commercial purposes, oth	er than using the name and a			erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Fig. 1) Mark Greenberg for	•			
A.	Full Name (Last, First, Middle Cooper Communica				Date of Disbursement
	Mailing Address 77 Ripley Hi	II Road			12 22 2015
	City Coventry	State CT	Zip Code 06238-1631	1	Amount of Each Disbursement this Period
	Purpose of Disbursement Debt Repayment: Public Rela Candidate Name	ations Consultant		001	1000.00 Transaction ID : BE68CCF535C624093910
	Office Sought: House Senat Presic State: District:	e Primary	X General	Category/ Type	
В.	Pull Name (Last, First, Middle Dey Smith Steele, L Mailing Address 9 Depot Stree Floor 2	LC			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Milford Purpose of Disbursement	State CT	Zip Code 06460-3357		Amount of Each Disbursement this Period 1625.00
	Debt Repayment: legal fees Candidate Name			001 Category/ Type	Transaction ID : B35678396C1864749956
	Office Sought: House Senat Presic State: District:	e Primary	X General	,,,,,,	
C.	Full Name (Last, First, Middle Dey Smith Steele, L	•			Date of Disbursement
	Mailing Address 9 Depot Stree				10 28 / Y Y Y Y Y Y Z
	City Milford Purpose of Disbursement Debt Repayment: legal fees Candidate Name	· · · · · · · · · · · · · · · · · · ·	p Code 6460-3357	001	Amount of Each Disbursement this Period 2500.00 Transaction ID: BD9070BE925C14013869
	Office Sought: House Senat Presic	e Primary	General	Category/ Type	
	State: District:				

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

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

5125.00

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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee of solicit contributions from such contributions from suc	19b 21 putions
A. Dey Smith Steele, LLC Mailing Address 9 Depot Street Floor 2 City State Zip Code Milford CT 06460-3357 Purpose of Disbursement Debt Repayment: legal fees Candidate Name Category/ Type Office Sought: House Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) B. William J Evans Mailing Address 325 Celia Drive City State Zip Code Amount of Each Disbursement this Category/ Type Date of Disbursement Dot Disbursement Date of Disbursement Date of Disbursement M M M M M M M M M M M M M M M M M M M	ittoe.
Floor 2 City State Zip Code Milford CT 06460-3357 Purpose of Disbursement Debt Repayment: legal fees Candidate Name Category/ Type Office Sought: House Disbursement For: 2014 Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) William J Evans Mailing Address 325 Celia Drive City State Zip Code Amount of Each Disbursement this Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y
Milford CT 06460-3357 Purpose of Disbursement Debt Repayment: legal fees Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) William J Evans Mailing Address 325 Celia Drive City State Zip Code CT 06460-3357 5868 Transaction ID: B3932D381BE094EE Transaction ID: B3932D381BE094EE Transaction ID: B3932D381BE094EE Transaction ID: B3932D381BE094EE Amount of Each Disbursement this	_
Debt Repayment: legal fees Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) William J Evans Mailing Address 325 Celia Drive City State Zip Code On Transaction ID: B3932D381BE094EE Category/ Type Transaction ID: B3932D381BE094EE Category/ Type Transaction ID: B3932D381BE094EE Category/ Type Other (specify) Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Office Sought: House Disbursement For: 2014 Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) B. William J Evans Mailing Address 325 Celia Drive City State Zip Code Amount of Each Disbursement this	
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) B. William J Evans Mailing Address 325 Celia Drive City State Zip Code Amount of Each Disbursement this	
Full Name (Last, First, Middle Initial) William J Evans Mailing Address 325 Celia Drive Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
B. William J Evans Mailing Address 325 Celia Drive City Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Amount of Each dispursement this	Y
Purpose of Disbursement Debt Repayment: lodging Candidate Name 1000 Category/ Type	
Office Sought: Senate President State: Disbursement For: 2014 Primary Other (specify) Other (specify)	
Full Name (Last, First, Middle Initial) C. William J Evans Date of Disbursement	v
Mailing Address 325 Celia Drive	
City State Zip Code Amount of Each Disbursement this Wolcott CT 06705-3153	Period
Purpose of Disbursement Debt Repayment: lodging 1079	
Candidate Name Category/ Type Transaction ID : BAAD0DF5D8CF14F	.JDV I
Office Sought: House Disbursement For: 2014 Senate Primary Other (specify)	
State: District:	

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

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

7944.04

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

Image# 201601289004698134					
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and					
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		Date of Disbursement 12 22 2015			
City State Milford CT Purpose of Disbursement Debt Repayment: legal fees Candidate Name Office Sought: House Disbursement For Senate Primary President Other (s	X General	Amount of Each Disbursement this Period 213.85 Transaction ID: B0C8478BA878D423F87E			
Full Name (Last, First, Middle Initial)					

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

Mailing Address			M M / D D / Y Y Y Y
City	State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name			
Candidate manie		Category/ Type	
Senate President	Disbursement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Tan Hamo (East, Files, Modio Illina)			Date of Disbursement
Mailing Address			M M / D D / Y Y Y Y
City	State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement			,
Candidate Name		Category/ Type	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (o	ptional)		213.85
OTAL This Period (last page this line num	ber only)		17282.89

	B (FEC Form 3) DISBURSEMENTS	Use separate scl	y of the	FOR LINE NUMBER: PAGE 10 OF 54 (check only one)
		Detailed Summar	ry Page	20a 20b 20c X 21
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
\	MMITTEE (In Full)			
/	enberg for Congress			
,	t, First, Middle Initial) ak For Congress			Date of Disbursement
Mailing Address	s 51 Hammonassett Meadows Rd			11 12 2015
City	State	Zip Code		Amount of Each Disbursement this Period
Madison	СТ	06443-2011	ı	707.00
Purpose of Disi Donation of do			003	727.00
Candidate Nam	ne		Category/	Transaction ID : BE04465E407614C7DA3B
Daria Nov	ak For Congress		Type	
Office Sought:	House Disbursement For Senate Primary Other (s	General		
State:	District:			
Full Name (Las	t, First, Middle Initial)			
3.				Date of Disbursement
Mailing Address	S			M M / D D / Y Y Y
City	State	Zip Code		Amount of Each Disbursement this Period
Purpose of Dis	bursement			
Candidate Nam	ne		Category/ Type	
Office Sought:	House Disbursement For Senate Primary			
State:	President Other (s	specify)		
	t, First, Middle Initial)			
C.	t, i not, whome minary			Date of Disbursement
Mailing Address	S			M M / D D / Y Y Y
City	State Z	ip Code		Amount of Each Disbursement this Period
Purpose of Dis	bursement			
Candidate Nam	le		Category/ Type	
Office Sought:	House Disbursement For Senate Primary	General		
State:	President Other (s	specify)		
Siait.	District:			
CUDTOTAL -4 D	ighurgomente This Dage (astisse)			727.00
SUBIUIAL Of DI	sbursements This Page (optional)			-
				727.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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OF

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X 13a Detailed Summary Page 13b Transaction ID: CFEBC2E2425BC4BC5823 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 300000.00 0.00 300000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D31 ^M08^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 300000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

PAGE FOR LINE NUMBER: (check only one)

12 OF

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×		13a
		13b

54

Detailed Summary Page Transaction ID: C55D484FE54D34017B00 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 65000.00 0.00 65000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 23 ^M 10^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 65000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

PAGE FOR LINE NUMBER: (check only one)

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X	13a
	13b

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Detailed Summary Page Transaction ID: CC474E6A9D9E145438A5 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 06^M 06 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		Detailed Suffiffiary P	age	13b
NAME OF COMMITTEE (In Full)		Trans	action ID : C9CC59E63697E486EB69	1
Mark Greenberg for Congress				
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	[PERSONAL FUNDS]		
Mark Greenberg			Primary	
Mailing Address			General Other (specify) ▼	
184 Fern Ave			Other (specify)	
City	State ZIP Coo			
Litchfield	CT 06759-2			
Elicinicia				
Original Amount of Loan	Cumulative Payment To	Date Ba	alance Outstanding at Close of This F	eriod
12500.00		0.00	12500.00	
	7 7		, , , , , ,	_
TERMS Date Incurred	Date Due	Interest Ra	ate Secured:	
M 08 / D 15 D / Y Y 2014 Y	M M / D D / Y	Ňone Y	00 % (apr)	<u> </u>
List All Endorsers or Guarantors (if any)	to Loan Source		Yes	No
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:	7	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:	7	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
(2003, 11103, 11104)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:	9	
				$\overline{}$
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line on	nly)	·····	· · · · · · · · · · · · · · · · · · ·	
Carry outstanding balance only to LINE 3, So	chedule D, for this line. If I	no Schedule D, carry fo	prward to appropriate line of Summ	ary.

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

PAGE FOR LINE NUMBER: (check only one)

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	13b

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Transaction ID: CCB5478271BD04BCA941 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 17500.00 0.00 17500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 05^M 03 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 17500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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AME OF COMMITTEE (In Full)		Transac	ction ID : CD07EFD888A3B4648AE3
Mark Greenberg for Congress			
LOAN SOURCE Full Name (Last, First, M	iddle Initial)	[PERSONAL FUNDS]	Election: 2014
Mark Greenberg			Primary General
Mailing Address 184 Fern Ave			Other (specify) ▼ Convention2014
City	State ZI	P Code	
Litchfield	CT 06	6759-2721	
Original Amount of Loan	Cumulative Payme	nt To Date Bala	ance Outstanding at Close of This Period
5000.00	2	0.00	5000.00
TERMS Date Incurred	Date	Due Interest Rate	e Secured:
M11 ^M / D26 ^D / Y Ž013 Y	M M / D D /	Y Ňone Y 0.00	
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:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	9 9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
OTALS This Period This Page (optional)			5000.00

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AME OF COMMITTEE (In Full)		Transaction ID : CB60	CC071A86C4A02B17
Mark Greenberg for Congress			
LOAN SOURCE Full Name (Last, First, Mark Greenberg	/liddle Initial)	[PERSONAL FUNDS] Election: 2 Primary General	014
Mailing Address 184 Fern Ave		Other (sp. Convention)	
City	State Z	IP Code	
Litchfield	СТ	06759-2721	
Original Amount of Loan	Cumulative Paym	ent To Date Balance Outstandin	ng at Close of This Period
15000.00		0.00	15000.00
TERMS Date Incurred	Dat	e Due Interest Rate	Secured:
M 09 M / D 27 D / Y 2013 Y	M M / D D	None 0.00 % (a	pr) 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	
		Amount	
City State	ZIP Code	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	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This Page (optional)			
OTALS This Period (last page in this line o	nly)		. ,
Carry outstanding balance only to LINE 3, S	 Schedule D, for this I	ne. If no Schedule D, carry forward to appro	priate line of Summary.

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NAME OF COMMITTEE (In Full)	Transaction ID : CD4093CB301954FA8B73
Mark Greenberg for Congress	
LOAN SOURCE Full Name (Last, First, Middle Initial) Mark Greenberg	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 184 Fern Ave	Other (specify) ▼ Convention2014
City State	ZIP Code
Litchfield CT	06759-2721
Original Amount of Loan Cumulative	Payment To Date Balance Outstanding at Close of This Period 0.00 10000.00
TERMS	
Date Incurred M 06 M / D04 D / Y Z013 Y M M / D	None 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Sou	
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
	Amount
City State ZIP Code	
SUBTOTALS This Period This Page (optional)	
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.

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Transaction ID: CF8A2925E3D2E4806B3C NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) \blacktriangledown 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 75000.00 0.00 75000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D25 ^M 07^M Ž012 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Transaction ID: CECBA7AF2579C4725B29 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 235000.00 105000.00 130000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D30 ^M 06^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 130000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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AME OF COMMITTEE (In Full)				Transacti	on ID : CA2C1E440	0008A41FDB5E
lark Greenberg for Congre	SS					
LOAN SOURCE Full Name (Last,	First, Middle Initial)	[PERSONAL	. FUNDS]	Election: 2014	
Mark Greenberg					Primary General	
Mailing Address 184 Fern Ave					Other (specify)	▼
City	State	ZIP Co	ode	<u> </u>		
Litchfield	СТ	06759-	-2721			
Original Amount of Loan	Cumulat	tive Payment To	Date	Balan	ce Outstanding at	Close of This Perio
1500	0.00	,	0.00			15000.00
TERMS Date Incurred		Date Due	-	nterest Rate		Secured:
M06 ^M / D16 ^D / Y 2014	Y M M /	D D / Y	None	0.00	% (apr)	Yes No
List All Endorsers or Guarantors	(if any) to Loan S	ource				100 140
1. Full Name (Last, First, Middle I	nitial)		Name of Emp	loyer		
Mailing Address			Occupation			
			Amount			
City	State ZIP Co	ode	Guaranteed Outstanding:		7	
2. Full Name (Last, First, Middle In	itial)		Name of Emp	loyer		
Mailing Address			Occupation			
			Amount			
City	State ZIP Co	ode	Guaranteed Outstanding:		7	
3. Full Name (Last, First, Middle In	itial)		Name of Emp	loyer		
Mailing Address			Occupation			
			Amount			
City	State ZIP Co	ode	Guaranteed Outstanding:		7	
4. Full Name (Last, First, Middle In	itial)		Name of Emp	loyer		
Mailing Address			Occupation			
City	State ZIP Co	ode	Amount Guaranteed Outstanding:		7 7	
UBTOTALS This Period This Page () [7 7	15000.00

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Transaction ID: C0528A3D351754D3BB6C NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 8000.00 0.00 8000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= м} ^D 13^D 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 8000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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		Detailed Garrinary 1 ag	13b
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress		Transac	etion ID : C71137021C269419383D
LOAN SOURCE Full Name (Last, First, Middl Mark Greenberg	e Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 184 Fern Ave			X Other (specify) ▼ Convention2014
	tate ZIP Cod		
Litchfield	CT 06759-21	721 	
Original Amount of Loan 7500.00	Cumulative Payment To [Oate Bala 0.00	ance Outstanding at Close of This Period 7500.00
Date Incurred Mo6 / D18 / Y 2013 Y		Interest Rate	
List All Endorsers or Guarantors (if any) to 1 1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	7IP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State		Amount Guaranteed Outstanding:	, , , , , , , ,
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	0000	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (optional)			7500.00
TOTALS This Period (last page in this line only)		•	
Carry outstanding balance only to LINE 3, Scheo	dule D, for this line. If n	o Schedule D, carry forv	vard to appropriate line of Summarv.

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Transaction ID: CBA924F3BC0384AB1B4A NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) \blacktriangledown 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 95000.00 0.00 95000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 13^D ^M08^M Ž012 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 95000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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for each category of the **X** 13a Detailed Summary Page 13b Transaction ID: CFABA2000D23841ACB3D NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 150000.00 0.00 150000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 10^M 09 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 150000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: CAD835A72DC2043B4B84 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^м 12^м ^D 17 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: C5433DBD61BFC46F3B52 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 25000.00 0.00 25000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 10^M ^D28^D ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 25000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: C608ACCA87AF942D485C NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 7500.00 0.00 7500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= м} 02 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 7500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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		Detailed Guillinary 1 ag	13b
ME OF COMMITTEE (In Full)		Transac	tion ID : C8120BECF32A9412997B
ark Greenberg for Congress	5		
LOAN SOURCE Full Name (Last, F	rst, Middle Initial)	[PERSONAL FUNDS]	Election: 2014
Mark Greenberg			Primary General
Mailing Address			X Other (specify) ▼
184 Fern Ave			Convention2014
City	State ZIP	Code	
Litchfield	CT 067	59-2721	
Original Amount of Loan	Cumulative Payment	To Date Bala	nce Outstanding at Close of This Perio
10000.0	00	0.00	10000.00
TERMS		3	3 3 4
Date Incurred	Date D		Secured:
^M 09 ^M / ^D 16 ^D / Y Ž013	Y M M / D D /	None 0.00	% (apr)
List All Endorsers or Guarantors (if	any) to Loan Source		Yes No
1. Full Name (Last, First, Middle Ini	= -	Name of Employer	
Mailing Address		Occupation	
		A	
City	State ZIP Code	Amount Guaranteed	
		Outstanding:	7
2. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	7 7
3. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed	
4. Full Name (Last, First, Middle Initi	al)	Outstanding: Name of Employer	,
T. Tuli Name (East, 1 list, Middle lilli	aij	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	7
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arry outstanding balance only to LINI	3. Schedule D. for this line.	If no Schedule D. carry forw	vard to appropriate line of Summary

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AME OF COMMITTEE (In Fu					Transac	ction ID	: C538F7BD	086F1462	6BF2
Mark Greenberg for C						_			
LOAN SOURCE Full Nan	ne (Last, First, Middle	e Initial)		[PERSONA	AL FUNDS]	Electi	_0		
Mark Greenberg							rimary General		
Mailing Address 184 Fern Ave							other (specify	▼	
City	S	tate	ZIP Cod	9					
Litchfield		СТ	06759-2	'21					
Original Amount of Loan		Cumulative Pa	ayment To [ate	Bala	ance Ou	tstanding at	Close of	This Perio
	15000.00			0.0	00		,	1500	00.00
TERMS Date Incurr	red		Date Due		Interest Rate	e.		Secure	d:
M 06 / D 23 / 1	ž014 ^Y			None	0.00)	% (apr)	Yes	X
List All Endorsers or Gua	arantors (if any) to I	oan Source						10.	5 14
1. Full Name (Last, First,	Middle Initial)			Name of Em	nployer				
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding		7			
2. Full Name (Last, First,	Middle Initial)			Name of Em	nployer				
Mailing Address				Occupation					
				Amount					_
City	State	ZIP Code		Guaranteed Outstanding	. L	7	7		
3. Full Name (Last, First,	Middle Initial)			Name of Em	nployer				
Mailing Address				Occupation					
				Amount	_				_
City	State	ZIP Code		Guaranteed Outstanding	. L	7			
4. Full Name (Last, First,	Middle Initial)			Name of Em	nployer				
Mailing Address				Occupation					
				Amount	-				_
City	State	ZIP Code		Guaranteed Outstanding		7	7		
UBTOTALS This Period Thi							, ,	1500	00.00
							, , , , , , , , , , , , , , , , , , , ,	line : CO	
arry outstanding balance of	miv to LINE 3. Sched	we D. Tor th	us une. It n	2 Schedule	L. Carry for	vara to	appropriate	une of S	ummary.

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Detailed Summary Page Transaction ID: CEF6B472032C5458B8F5 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D30 ^M 09^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: C2530A505B6DB44D089F NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M 28 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) FOR LINE NUMBER: for each category of the **X** 13a **LOANS** (check only one) Detailed Summary Page 13b Transaction ID: C9BDE8AB0A22C4E7092B NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 200000.00 0.00 200000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 15 ^M 10^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation

SUBTOTALS This Period This Page (optional)..... 200000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

State

ZIP Code

Amount

Guaranteed

Outstanding:

City

PAGE

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Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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JAN 6			Detailed Summary P	age	13b
AME OF COMMITTEE (In Full)			Trans	action ID : CC107E48	9D0E64C9083D
Mark Greenberg for Con					
LOAN SOURCE Full Name (L	_ast, First, Middl	le Initial)	[PERSONAL FUNDS]	Election: 2014	
Mark Greenberg				Primary General	
Mailing Address 184 Fern Ave				Other (specify	y) ▼
City	S	itate ZIP	Code		
Litchfield		CT 0675	59-2721		
Original Amount of Loan		Cumulative Payment	To Date Ba	alance Outstanding at	Close of This Period
7 7	21000.00	2	0.00		21000.00
TERMS Date Incurred		Date Du	ue Interest Ra	ate	Secured:
M11 ^M / D04 ^D / Y 2	2014 Y	M / D D /	None 0.	00 % (apr)	Yes No
List All Endorsers or Guaran		Loan Source			
1. Full Name (Last, First, Mid	ldle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Midd	dle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	7 7	
3. Full Name (Last, First, Midd	dle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	7 7	- A
4. Full Name (Last, First, Midd	dle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	-,,-	
SUBTOTALS This Period This Pa	age (optional)		<u> </u>		21000.00
TOTALS This Period (last page in	n this line only).		·····		
Carry outstanding balance only	to LINE 3 Scher	dule D for this line	If no Schedule D. carry fo	rward to appropriate	line of Summary

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

FOR LINE NUMBER: (check only one)

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	13b
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress	Transaction ID : CFD73008F64174859A74
LOAN SOURCE Full Name (Last, First, Middle Initial) Mark Greenberg	[PERSONAL FUNDS] Election: 2012 Primary General
Mailing Address 184 Fern Ave	Other (specify) ▼ Convention2012
City State ZIP Co	ode
Litchfield CT 06759-	-2721
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period
500000.00	2600.00 212400.00
TERMS Date Incurred Date Due	Interest Rate Secured:
M ₀₃ M _{/ D₃₁D_{/ Y} 2012 Y M M / D D / Y}	None 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
	Amount
City State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	212400.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3. Schedule D. for this line. If	no Schedule D. carry forward to appropriate line of Summary

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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		Detailed Summary Pag	ge 13b
AME OF COMMITTEE (In Full)		Transac	tion ID : CD1D81F253F794C4188B
Mark Greenberg for Congress			
LOAN SOURCE Full Name (Last, First, Mic Mark Greenberg	ddle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 184 Fern Ave			Other (specify)
City	State ZIP Coo	de	1
Litchfield	CT 06759-2	2721	
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
5000.00		0.00	5000.00
Date Incurred Mo6 ^M / Do3 ^D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Date Due	Interest Rate	% (apr)
List All Endorsers or Guarantors (if any) t	o Loan Source		Yes No
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7
SUBTOTALS This Period This Page (optional).			5000.00
Carry outstanding balance only to LINE 3. Set	•		, , , , , , , , , , , , , , , , , , ,

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

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		Detailed Garrinary Fag	13b
ME OF COMMITTEE (In Full)		Transac	ction ID : CF9D2816C62954C8CB87
lark Greenberg for Congress	5		
LOAN SOURCE Full Name (Last, Fi Mark Greenberg	rst, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary
Mailing Address 184 Fern Ave			General ✓ Other (specify) ▼ Convention2014
City	State ZII	P Code	
Litchfield		6759-2721	
Original Amount of Loan	Cumulative Payme	nt To Date Bala	ance Outstanding at Close of This Period
7500.0	0	0.00	7500.00
TERMS Date Incurred	Date	Due Interest Rate	e Secured:
^M 02 ^M / ^D 06 ^D / Y Ž014	Y M M / D D /	Y None 0.00	
List All Endorsers or Guarantors (if	any) to Loan Source		
1. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City S	State ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	state ZIP Code	Guaranteed Outstanding:	7 7 7 7
UBTOTALS This Period This Page (op	tional)	<u> </u>	7500.00
OTALS This Period (last page in this li	ne only)	· _	
arry outstanding balance only to LINE	3. Schedule D. for this lin	e. If no Schedule D. carry for	ward to appropriate line of Summary.

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

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Transaction ID: CA255D27209C6400EB5A NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 8000.00 0.00 8000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M08^M 06 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 8000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: CB3C30926CC3D4713ACF NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 650000.00 1000.00 79000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 06^M ^D30 Ž012 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 79000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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PANS			Detailed Summary Pag	ge (check only one)
AME OF COMMITTEE (In Full)			Transac	ction ID : C762400101B594EFB9BE
lark Greenberg for Cong				
LOAN SOURCE Full Name (L Mark Greenberg	ast, First, Mic	ddle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 184 Fern Ave				Other (specify) ▼ Convention2014
City		State ZIP	Code	
Litchfield		CT 067	759-2721	
Original Amount of Loan		Cumulative Payment	t To Date Bala	ance Outstanding at Close of This Period
7 7	7400.00		0.00	96000.00
TERMS Date Incurred		Date D	Due Interest Rate	e Secured:
M 03 M / D 03 D / Y 20)14 ^Y	M M / D D /	None 0.00	% (apr) Yes No
List All Endorsers or Guarant		o Loan Source		
1. Full Name (Last, First, Midd	dle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Midd	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Midd	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7
4. Full Name (Last, First, Midd	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This Pa	ge (optional)			96000.00
OTALS This Period (last page in	this line only	/)		, , , , , , , , , , , , , , , , , , , ,
Carry outstanding balance only t	LINE 3. Sch	nedule D. for this line	. If no Schedule D. carry for	vard to appropriate line of Summary.

Use separate schedule(s) for each category of the

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X 13a (check only one) Detailed Summary Page 13b Transaction ID: CC4F9D300B97E418CB4B NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5500.00 0.00 5500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 04 ^м 12^м 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

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for each category of the **X** 13a (check only one) Detailed Summary Page 13b Transaction ID: CE33093641F8544E79B7 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M08^M 09 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: C71BF6E42B9164E6D9B3 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 12000.00 0.00 12000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^м 12^м ^D 11 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 12000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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		Detailed Summary Pa	13k
AME OF COMMITTEE (In Full)		Transa	ction ID: C4C5EFE472C5D4BD6A5D
Mark Greenberg for Congress			
LOAN SOURCE Full Name (Last, First, Middle Mark Greenberg	le Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 184 Fern Ave			Other (specify) ▼ Convention2014
City	state ZIP Cod	de	
Litchfield	CT 06759-2	2721	
Original Amount of Loan	Cumulative Payment To	Date Bal	ance Outstanding at Close of This Peri
TERMS Date Incurred	Date Due	Interest Rat	te Secured:
M 08 / 19 / Y 2013 M	M / D D / Y	None 0.0	
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:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7 1 7 1 1
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 9
SUBTOTALS This Period This Page (optional)			
Carry outstanding balance only to LINE 3, Scheo			ward to appropriate line of Summary

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: CA5403816357B4746BD4 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D21 ^D ^M 05^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) FOR LINE NUMBER: for each category of the **X** 13a (check only one) Detailed Summary Page 13b Transaction ID: C80BBC0D174A54CF79D4 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 33000.00 0.00 33000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 10^M ^D29^D ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 33000.00 TOTALS This Period (last page in this line only)

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

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		Detailed Guillilary 1 a	13b
NAME OF COMMITTEE (In Full)		Transa	ction ID : CD4115B528CF14546B50
Mark Greenberg for Congress			
LOAN SOURCE Full Name (Last, First	t, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary
Mark Greenberg			General
Mailing Address 184 Fern Ave			Other (specify) ▼ Convention2014
City	State ZIP C	ode	
Litchfield	CT 06759	9-2721	
Original Amount of Loan	Cumulative Payment To	o Date Bal	ance Outstanding at Close of This Period
6000.00		0.00	6000.00
TERMS Date Incurred	Date Due	e Interest Rat	re Secured:
M 02 M / D 11 D / Y Ž01 Ž	M M / D D / Y	None Y 0.0	0 % (apr) Yes No
List All Endorsers or Guarantors (if a			
1. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City Sta	ate ZIP Code	Outstanding:	9 9 9
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ate ZIP Code	Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	ate ZIP Code	Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	ate ZIP Code	Guaranteed Outstanding:	9 9 9 9
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TOTALS This Period (last page in this line			0000.00
			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
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Transaction ID: C5567BFAB217D40639A2 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 12500.00 0.00 12500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 04 ^M 09^M 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 12500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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		Detailed Guillinary	13b
NAME OF COMMITTEE (In Full)		Trar	nsaction ID: C1EF3F3C5664D40EF8FF
Mark Greenberg for Congres			
LOAN SOURCE Full Name (Last,	First, Middle Initial)	[PERSONAL FUNDS	Election: 2014 Primary
Mark Greenberg			General
Mailing Address 184 Fern Ave			Other (specify)
City	State	ZIP Code	
Litchfield	СТ	06759-2721	
Original Amount of Loan	Cumulative P	ayment To Date	Balance Outstanding at Close of This Period
175000	.00	171400.00	3600.00
TERMS Date Incurred		Date Due Interest	Rate Secured:
M07 ^M / D03 ^D / Y 2014	Y M M / D	None Y	0.00 % (apr) Yes No
List All Endorsers or Guarantors	· · · · · · · · · · · · · · · · · · ·		
1. Full Name (Last, First, Middle Ir	nitial)	Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City	State ZIP Code	Outstanding:	9 9 9 9
2. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	7 7 7 7
SUBTOTALS This Period This Page (c	antional)		3600.00
	,ptional)	·····	3000.00
TOTALS This Period (last page in this	line only)	·····	1811500.00
Carry outstanding balance only to LIN	IE 3, Schedule D. for th	is line. If no Schedule D. carry	forward to appropriate line of Summary.

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 50 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

54

NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Mark Greenberg for Co	ongress	
A. Full Name (Last, First, Middle Initial) of Debt Dey Smith Steele, LLC	Nature of Debt (Purpose): legal fees	
Mailing Address 9 Depot Street Floor 2		
City State Milford	Zip Code CT 06460-3357	
Outstanding Balance Beginning This Period		Transaction ID : DB6430B895C0F48A7A1D
8368.75		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	8368.75	0.00
B. Full Name (Last, First, Middle Initial) of Debto Watertown Main Street LLC	or or Creditor	Nature of Debt (Purpose): rent headquarters
Mailing Address PO Box 28		
City State	Zip Code	
Watertown	CT 06795-0028	
Outstanding Balance Beginning This Period 1250.00		Transaction ID: D366E903FA4464DD7A4D
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1250.00
C. Full Name (Last, First, Middle Initial) of Debt	Nature of Debt (Purpose): accounting and software	
Theroux, Nowell & Stoughton, L	LC	accounting and contware
Mailing Address 53 Peck Road		
City Torrington	State Zip Code CT 06790-6106	
Outstanding Balance Beginning This Period 3434.75		Transaction ID: D6507C36E07BA4CDB916
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	3000.00	434.75
SUBTOTALS This Period This Page (optional)		1684.75
TOTALS This Period (last page this line number	r only)	
TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	
ADD 2) and 3) and carry forward to appropriate	e line of Summary Page (last page only)	>

1)

2)

3)

4)

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 51 OF
FOR LINE NUMBER:
(check only one)

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54

NAME OF COMMITTEE (In Full)

Mark Greenberg for C	ongress			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cooper Communications LLC			Nature of Debt (Purpose): Public relations consultant	
Mailing Address 77 Ripley Hill Road				
City State Coventry	Zip Code CT	06238-1631		
Outstanding Balance Beginning This Period 943.50			Transaction ID: D5851A390930444CA900	
Amount Incurred This Period 0.00	Payn	nent This Period 943.50	Outstanding Balance at Close of This Period 0.00	
B. Full Name (Last, First, Middle Initial) of Deb Dey Smith Steele, LLC	tor or Creditor		Nature of Debt (Purpose): legal fees	
Mailing Address 9 Depot Street Floor 2 City State	Zip Code		_	
Milford	СТ	06460-3357		
Outstanding Balance Beginning This Period 1625.00			Transaction ID : D2039E0041DC549E5B4F	
Amount Incurred This Period 0.00	Payn	nent This Period	Outstanding Balance at Close of This Period 0.00	
C. Full Name (Last, First, Middle Initial) of De Cooper Communications LLC	btor or Creditor		Nature of Debt (Purpose): Public Relations Consultant	
Mailing Address 77 Ripley Hill Road				
City Coventry	State CT	Zip Code 06238-1631	_	
Outstanding Balance Beginning This Period 3721.75			Transaction ID : DF28B3AD16148440BBDB	
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period	
0.00		1056.50	2665.25	
1) SUBTOTALS This Period This Page (optional)			, 2665.25	
2) TOTALS This Period (last page this line number	per only)	>		
3) TOTAL OUTSTANDING LOANS from Schedu	lle C (last page onl	y)		
4) ADD 2) and 3) and carry forward to appropri	ate line of Summar	v Page (last page only)		

NAME OF COMMITTEE (In Full)

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Excluding Loans

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

PAGE 52 OF FOR LINE NUMBER: (check only one)

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Mark Greenberg for Cor	ngress	
A. Full Name (Last, First, Middle Initial) of Debtor Watertown Main Street LLC	Nature of Debt (Purpose): Office Rent	
Mailing Address PO Box 28		
City State Watertown	Zip Code CT 06795-0028	
Outstanding Balance Beginning This Period		Transaction ID : DF2520AB50E9F4DBAB7E
1250.00		
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1250.00
B. Full Name (Last, First, Middle Initial) of Debtor of Jamestown Associates	or Creditor	Nature of Debt (Purpose): broadcast TV Advertising
Mailing Address 5 Mapleton Road Suite 300		
City State Princeton	Zip Code NJ 08540-9646	
Outstanding Balance Beginning This Period 1275.00		Transaction ID: D5108054CCF8F43D189A
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1275.00
C. Full Name (Last, First, Middle Initial) of Debtor Red Maverick Media, LLC	or Creditor	Nature of Debt (Purpose): direct mail advertising design fee
Mailing Address 403 N 2nd Street Suite 2		
City Harrisburg	State Zip Code PA 17101-1377	
Outstanding Balance Beginning This Period 200.00		Transaction ID : D91D6AEC9EBF945589B0
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	200.00
1) SUBTOTALS This Period This Page (optional)		2725.00
2) TOTALS This Period (last page this line number of	nly)	
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)	

Excluding Loans

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

PAGE 53 OF FOR LINE N (check only

NUMBER:		
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54

NAME OF COMMITTEE (In Full)

Mark Greenberg for Co	ngress	3		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Theroux, Nowell & Stoughton, LLC			Nature of Debt (Purpose): accounting services	
Mailing Address 53 Peck Road				
City State	Zip Code			
Torrington	CT	06790-6106		
Outstanding Balance Beginning This Period			Transaction ID: D5C60BE2B34E644C09E8	
10730.50				
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period	
0.00	,	0.00	10730.50	
B. Full Name (Last, First, Middle Initial) of Debtor Dey Smith Steele, LLC	or Creditor		Nature of Debt (Purpose): legal fees	
Mailing Address 9 Depot Street Floor 2				
City State Milford	Zip Code CT	06460-3357		
Outstanding Balance Beginning This Period			Transaction ID : DE213B92F513F4A848DC	
213.85				
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period	
0.00	7	213.85	0.00	
C. Full Name (Last, First, Middle Initial) of Debto			Nature of Debt (Purpose):	
Theroux, Nowell & Stoughton, Ll	_C		accounting services	
Mailing Address 53 Peck Road				
City	State	Zip Code		
Torrington	СТ	06790-6106		
Outstanding Balance Beginning This Period			Transaction ID : DB2977F1C21BB4D45991	
4487.50				
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	4487.50	
) SUBTOTALS This Period This Page (optional)			15218.00	
,				
) TOTALS This Period (last page this line number	only)			
) TOTAL OUTSTANDING LOANS from Schedule	C (last page or	nly)		
) ADD 2) and 3) and carry forward to appropriate	line of Summa	ary Page (last page only)		

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 54 OF
FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)	
Mark Greenberg	for Congress

A. Full Name (Last, First, Middle Initial) of Debtor			Nature of Debt (Purpose):
Theroux, Nowell & Stoughton, LLC			accounting services
Mailing Address 53 Peck Road			
City State	Zip Code		-
Torrington	СТ	06790-6106	
Outstanding Balance Beginning This Period			Transaction ID : DE61E39151183463985A
2568.75			
Amount Incurred This Period	Payme	ent This Period	Outstanding Balance at Close of This Period
0.00		0.00	2568.75
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
William J Evans			lodging
Mailing Address 325 Celia Drive			
City State	Zip Code		
Wolcott	СТ	06705-3153	
Outstanding Balance Beginning This Period			Transaction ID : DBC33491941414C19B07
2075.29			
Amount Incurred This Period	Payme	ent This Period	Outstanding Balance at Close of This Period
0.00	7	2075.29	0.00
C. Full Name (Last, First, Middle Initial) of Debtor Theroux, Nowell & Stoughton, LL			Nature of Debt (Purpose): accounting and software
Mailing Address 53 Peck Road			
City	State	Zip Code	
Torrington	СТ	06790-6106	
Outstanding Balance Beginning This Period			Transaction ID : DEC0BE4A91E7E4F16948
2422.50			
Amount Incurred This Period	Payme	ent This Period	Outstanding Balance at Close of This Period
0.00		0.00	2422.50
SUBTOTALS This Period This Page (optional)			4991.25
			27284.25
TOTALS This Period (last page this line number	only)		7 7 7
TOTAL OUTSTANDING LOANS from Schedule C (last page only)			1811500.00
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)			1838784.25