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16 AUG 17 PM 12:25

Dan Carter for U.S. Senate • PO Box 384 • Bethel, CT 06801

August 9, 2016

Secretary of the United States Senate
Office of Public Records
PO Box 77578
Washington DC 20013-7578

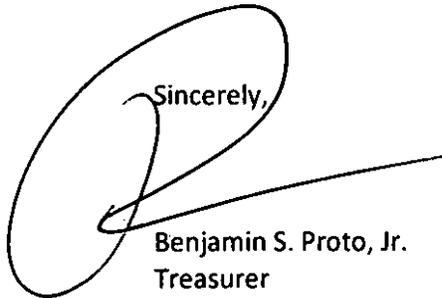
RE: Carter 2016, Amended Report of Receipts &
Disbursements, Pre Convention Report

Dear Secretary:

Enclosed please find Amended FEC Form 3 Report of Receipts and Disbursements for the above referenced US Senate Campaign Committee for the previous report for the Pre Convention period covering April 1, 2016 – April 19, 2016. Also enclosed is a self-addressed stamped envelope, please forward a stamped copy of the first page to me.

Please direct all correspondence to this office.

Thank you.

Sincerely,

Benjamin S. Proto, Jr.
Treasurer

Enc.

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

16 AUG 17 PM 12:25

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Carter 2016

ADDRESS (number and street) 211 Greenwood Avenue

Check if different than previously reported. (ACC) Bethel CT 06801 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C 00613935 3. IS THIS REPORT NEW (N) OR AMENDED (A) X STATE DISTRICT CT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on 05 / 09 / 2016 in the State of CT

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 04 / 01 / 2016 through 04 / 19 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Benjamin Proto

Signature of Treasurer Date 08 / 09 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Table with 10 columns and 1 row for Office Use Only

FEC FORM 3 (Revised 02/2003)

201608170200340138

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Carter 2016

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))...	6,950.00	6,950.00
(b) Total Contribution Refunds (from Line 20(d))...		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	6,950.00	6,950.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	52.93	52.93
(b) Total Offsets to Operating Expenditures (from Line 14)...		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	52.93	52.93
8. Cash on Hand at Close of Reporting Period (from Line 27)...	26,897.07	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...	20,000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

201608170200340139

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Carter 2016

Report Covering the Period: From: MM / DD / YYYY 04 / 01 / 2016 To: MM / DD / YYYY 04 / 19 / 2016

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	6,200.00	6,200.00
(i) Itemized (use Schedule A)...	750.00	750.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals .	0.00	0.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ...	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6,950.00	6,950.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	20,000.00	20,000.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	20,000.00	20,000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	26,950.00	26,950.00

201608170200340140

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	52.93	52.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	0.00	0.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	52.93	52.93

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	26,950.00
25. SUBTOTAL (add Line 23 and Line 24)...	26,950.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	52.93
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	26,897.07

201608170200340141

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1 OF 2
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) **Carter 2016**

A. Full Name (Last, First, Middle Initial) **Foley, Richard**

Mailing Address **27 Crow's Nest Lane Unit 4-I**

City **Danbury** State **CT** Zip Code

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

Name of Employer **Self** Occupation **Consultant**

Receipt For: Primary General Other (specify) **Convention**

Election Cycle-to-Date **300.00**

Date of Receipt **04 / 01 / 2016**

Amount of Each Receipt this Period **300.00**

Memo Item

B. Full Name (Last, First, Middle Initial) **McMahon, Linda**

Mailing Address **14 Hurlingham Drive**

City **Greenwich** State **CT** Zip Code **06831**

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

Name of Employer **McMahon Enterprises** Occupation **Executive**

Receipt For: Primary General Other (specify) **Convention**

Election Cycle-to-Date **2,700.00**

Date of Receipt **04 / 19 / 2016**

Amount of Each Receipt this Period **2,700.00**

Memo Item

C. Full Name (Last, First, Middle Initial) **McMahon, Linda**

Mailing Address **14 Hurlingham Drive**

City **Greenwich** State **CT** Zip Code **06831**

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

Name of Employer **McMahon Enterprises** Occupation **Executive**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **2,700.00**

Date of Receipt **04 / 19 / 2016**

Amount of Each Receipt this Period **2,700.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) **5,700.00**

TOTAL This Period (last page this line number only)

201608170200340142

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2 OF 2
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Carter 2016

A. Full Name (Last, First, Middle Initial)
Wood, Terrie

Mailing Address
50 St. Nicholas Road

City: Darien State: CT Zip Code: 06820

FEC ID number of contributing federal political committee: C

Name of Employer: State of Connecticut Occupation: Legislator

Receipt For:
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date: 500.00

Date of Receipt: 04 / 13 / 2016

Amount of Each Receipt this Period: 500.00

Memo Item

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... 500.00

TOTAL This Period (last page this line number only)..... 6,200.00

201608170200340143

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

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

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) A. Anedot, Inc		Date of Disbursement 04 / 13 / 2016
Mailing Address PO Box 84314		Amount of Each Disbursement this Period 19.80
City Baton Rouge, LA	Zip Code 70884	
Purpose of Disbursement Credit Card Transaction Fee		<input type="checkbox"/> Memo Item
Candidate Name Dan Carter		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) Convention	
State:	District:	

Full Name (Last, First, Middle Initial) B. Anedot, Inc		Date of Disbursement 04 / 15 / 2016
Mailing Address PO Box 84314		Amount of Each Disbursement this Period 4.20
City Baton Rouge, LA	Zip Code 70884	
Purpose of Disbursement Credit Card Transaction Fee		<input type="checkbox"/> Memo Item
Candidate Name Dan Carter		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) Convention	
State:	District:	

Full Name (Last, First, Middle Initial) C. Anedot, Inc		Date of Disbursement 04 / 18 / 2016
Mailing Address PO Box 84314		Amount of Each Disbursement this Period 4.20
City Baton Rouge, LA	Zip Code 70884	
Purpose of Disbursement Credit Card Transaction Fee		<input type="checkbox"/> Memo Item
Candidate Name Dan Carter		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) Convention	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	28.20
TOTAL This Period (last page this line number only).....	

201608170200340144

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

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Carter 2016

Full Name (Last, First, Middle Initial) A. Anedot Inc		Date of Disbursement MM / DD / YYYY 04 / 19 / 2016
Mailing Address PO Box 84314		Amount of Each Disbursement this Period 24.73
City Baton Rouge,	State LA	
Purpose of Disbursement Credit Card Fee		<input type="checkbox"/> Memo Item
Candidate Name Dan Carter		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Category/ Type 003
State: CT	District:	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State:	District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	24.73
TOTAL This Period (last page this line number only).....	52.93

201608170200340145

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Carter 2016**

LOAN SOURCE Full Name (Last, First, Middle Initial)	<input type="checkbox"/> Memo Item	Election:
Carter, Dan		<input type="checkbox"/> Primary
Mailing Address		<input type="checkbox"/> General
14 Katrina Circle		<input checked="" type="checkbox"/> Other (specify) Convention
City Bethel	State CT	ZIP Code 06801

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20,000.00	0.00	20,000.0

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	04^M / 19^D / 2016^Y	12^M / 31^D / 2016^Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 0.00
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 0.00
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 0.00
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 0.00

SUBTOTALS This Period This Page (optional).....	0.00
TOTALS This Period (last page in this line only)...	20,000.00

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

201608170200340146

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
 Information found on
 Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER C
-----------------------------	--------------------------------

LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR) %
Mailing Address	Date Incurred or Established	
City State Zip Code	Date Due	

A. Has loan been restructured? No Yes If yes, date originally incurred

B. If line of credit,
 Amount of this Draw: Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule 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?
 No Yes If yes, specify: What is the value of this collateral?
 Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account:
 Address:
 Date account established: 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 Signature	DATE
---	------

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 the 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 Signature	Title	DATE
--	-------	------

201608170200340147

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE	OF
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ...	
2) TOTALS This Period (last page this line number only) ...	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

201608170200340148

U.S. POSTAGE
STAMFORD, CT
06914
AUG 18
AMOUNT
\$1.57
R2305M147338-3



20013



1000

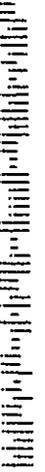


**SCREENED
BY THE SENATE
POST OFFICE**

S. PROTO, JR.

Law
Frog Road
C 060 4

Secretary of The US Senate
Office of Public Records
Box 77578
Washington DC 20013-7578



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL 8-17-16 8-12-16
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

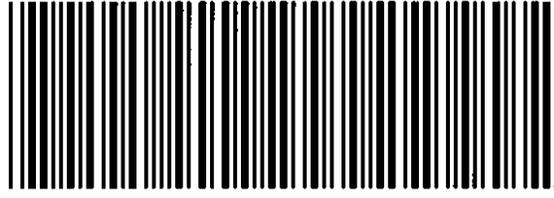
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

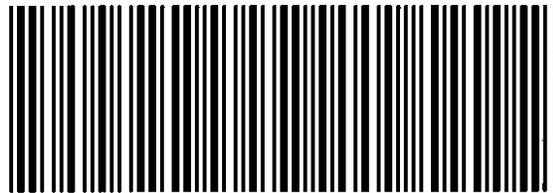
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 8-17-16

201608170200340150



SEN PATCH



SEN PATCH

201608170200340151