

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Friends of Frank Guinta

ADDRESS (number and street)

PO Box 877

Check if different  
than previously  
reported. (ACC)

Manchester

NH

03105

2. FEC IDENTIFICATION NUMBER ▼

C

C00461350

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

NH

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Richard Springer

Signature of Treasurer

Richard Springer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
**Friends of Frank Guinta**

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	21.43
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	0.00	21.43
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	2177.57	70430.50
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	460.25
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	2177.57	69970.25
8. Cash on Hand at Close of Reporting Period (from Line 27).....	412.61	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	288995.00	

## 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 / 16

Write or Type Committee Name

Friends of Frank Guinta

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

**I. RECEIPTS**
**COLUMN A**  
Total This Period

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

(a) Individuals/Persons Other Than Political Committees

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

(ii) Unitemized.....

(iii) TOTAL of contributions from individuals ▶

(b) Political Party Committees.....

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

(d) The Candidate.....

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

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....****13. LOANS:**

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

(b) All Other Loans.....

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

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....****15. OTHER RECEIPTS (Dividends, Interest, etc.) .....****16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 16

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2177.57	70430.50
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	25000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	25000.00
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	36000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	2177.57	131430.50

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	147.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2442.57
25. SUBTOTAL (add Line 23 and Line 24).....	2590.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2177.57
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	412.61

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFH`G7 <98I @G `CF`+H9A-N5HCB  
.

Form/Schedule: F3N  
Transaction ID :

The committeed conducted an internal review in preparation for closing down the committee. Upon review, there is a COH discrepancy of \$2442.57 that cannot be found. After discussing with the FEC analysts and supervisors, we have added an adjusting entry to correct the numbers.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER:

PAGE 6 OF 16

(check only one)

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

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)  
**Friends of Frank Guinta**

Full Name (Last, First, Middle Initial)

**Friends of Frank Guinta**

Mailing Address PO Box 877

City

Manchester

State

NH

Zip Code

03105

FEC ID number of contributing  
federal political committee.

C C00461350

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

General

Election Cycle-to-Date

2442.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2013

Transaction ID : SA15.4132

Amount of Each Receipt this Period

2442.57

COH Discrepancy Correction

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

General

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

General

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

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

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

2442.57

2442.57

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

PAGE 7 OF 16

<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)  
**Friends of Frank Guinta**

Full Name (Last, First, Middle Initial)

**A. Authorize.Net**

Mailing Address 808 East Utah Valley Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2013

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement  
E-Merchant Fees

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

57.90
-------

Transaction ID : SB17.4130

**B. Authorize.Net**

Mailing Address 808 East Utah Valley Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2013

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement  
E-Merchant Fees

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

57.90
-------

Transaction ID : SB17.4147

**C. Authorize.Net**

Mailing Address 808 East Utah Valley Drive

Date of Disbursement

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

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement  
E-Merchant Fees

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

57.90
-------

Transaction ID : SB17.4148

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

173.70

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

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<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)  
**Friends of Frank Guinta**

Full Name (Last, First, Middle Initial)

**A. Barclays Bank of Delaware**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Contested Charge

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	25	2013

Amount of Each Disbursement this Period

1067.73

Transaction ID : SB17.4133

**B. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824Purpose of Disbursement  
Compliance Consulting

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	16	2013

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4141

[MEMO ITEM]

**C. Campaign Financial Services**

Mailing Address PO Box 30844

City State Zip Code  
Bethesda MD 20824Purpose of Disbursement  
Storage

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	16	2013

Amount of Each Disbursement this Period

10.00

Transaction ID : SB17.4143

[MEMO ITEM]

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

1067.73

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



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

PAGE 9 OF 16

<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)  
**Friends of Frank Guinta**

Full Name (Last, First, Middle Initial)

**A. Moneris - ACH**

Mailing Address PO Box 1479

City	State	Zip Code
Eureka	CA	95502

Purpose of Disbursement  
E-Merchant Fees

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2013

Amount of Each Disbursement this Period

51.90
-------

Transaction ID : SB17.4128

**B. Moneris - ACH**

Mailing Address PO Box 1479

City	State	Zip Code
Eureka	CA	95502

Purpose of Disbursement  
E-Merchant Fees

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2013

Amount of Each Disbursement this Period

51.90
-------

Transaction ID : SB17.4146

**C. Moneris - ACH**

Mailing Address PO Box 1479

City	State	Zip Code
Eureka	CA	95502

Purpose of Disbursement  
E-Merchant Fees

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2013

Amount of Each Disbursement this Period

51.90
-------

Transaction ID : SB17.4149

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

155.70

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

PAGE 10 OF 16

<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)  
**Friends of Frank Guinta**

Full Name (Last, First, Middle Initial)

**A. TD Bank**

Mailing Address 300 Franklin Street

City	State	Zip Code
Manchester	NH	03101

Purpose of Disbursement  
Banking Service Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2013

Amount of Each Disbursement this Period

4	3	9	9	2
15.00				

Transaction ID : SB17.4153

**B. Verizon Wireless**

Mailing Address PO Box 15062

City	State	Zip Code
Albany	NY	12212

Purpose of Disbursement  
Cellular Phone Service

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		26		2013

Amount of Each Disbursement this Period

4	1	4	2
414.42			

Transaction ID : SB17.4125

**c. Wells Fargo Bank**

Mailing Address 7901 Wisconsin Avenue

City	State	Zip Code
Bethesda	MD	20814

Purpose of Disbursement  
Banking Service Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		11		2013

Amount of Each Disbursement this Period

1	0	5	0
10.50			

Transaction ID : SB17.4123

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

439.92



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

PAGE 12 OF 16

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
Friends of Frank Guinta

Transaction ID : SC/10.4110

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

Frank Guinta

**[PERSONAL FUNDS]**

Election: 2010

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO Box 877

City

State

ZIP Code

Manchester

NH

03105

Original Amount of Loan

100000.00

Cumulative Payment To Date

46500.00

Balance Outstanding at Close of This Period

53500.00

**TERMS**

Date Incurred

M / M / Y  
03 / 28 / 2010

Date Due

M / M / Y

D / D / Y

Y None Y

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

53500.00

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

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

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

PAGE 13 OF 16

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4113

Friends of Frank Guinta

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

**[PERSONAL FUNDS]**

Election: 2010

Frank Guinta

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

PO Box 877

City

State

ZIP Code

Manchester

NH

03105

Original Amount of Loan

125000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

125000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 27 / 2010

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

125000.00

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

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

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

PAGE 14 OF 16

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
Friends of Frank Guinta

Transaction ID : SC/10.4114

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

Frank Guinta

**[PERSONAL FUNDS]**

Election: 2010

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO Box 877

City

State

ZIP Code

Manchester

NH

03105

Original Amount of Loan

60000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

60000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 03 / 2010

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

60000.00

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

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

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

PAGE 15 OF 16

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4115

Friends of Frank Guinta

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

**[PERSONAL FUNDS]**

Election: 2010

Frank Guinta

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

PO Box 877

City

State

ZIP Code

Manchester

NH

03105

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
09 / 10 / 2010M M / D D / Y Y Y Y  
NoneY Y Y Y  
None

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

50000.00

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

288500.00

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

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

PAGE 16 OF 16

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

NAME OF COMMITTEE (In Full)

**Friends of Frank Guinta**

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

**Campaign Financial Services**

Nature of Debt (Purpose):

Compliance Consulting

Mailing Address PO Box 30844

City State

Zip Code

Bethesda

MD

20824

Outstanding Balance Beginning This Period

0.00

**Transaction ID : SD10.4145**

Amount Incurred This Period

385.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

385.00

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

**Campaign Financial Services**

Nature of Debt (Purpose):

Compliance Consulting

Mailing Address PO Box 30844

City State

Zip Code

Bethesda

MD

20824

Outstanding Balance Beginning This Period

0.00

**Transaction ID : SD10.4151**

Amount Incurred This Period

110.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

110.00

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) .....

495.00

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

495.00

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

288500.00

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

288995.00