07/15/2013 16 : 34

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# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3                         | For An Au                   | thorized Com          | mittee                           |                  |                  | Office Use Only                 |
|--------------------------------|-----------------------------|-----------------------|----------------------------------|------------------|------------------|---------------------------------|
| NAME OF COMMITTEE (in full)    | TYPE OR PRINT               |                       | ample: If typin<br>er the lines. | g, type          | 12FE4M5          |                                 |
| Friends of Frank               | Guinta                      |                       |                                  |                  |                  | 1                               |
| <u> </u>                       |                             |                       |                                  |                  |                  |                                 |
|                                | . DO Day 077                |                       |                                  |                  |                  |                                 |
| ADDRESS (number and s          | treet)                      |                       |                                  |                  |                  |                                 |
| Check if different             | ent                         |                       |                                  |                  |                  |                                 |
| than previously reported. (ACC |                             |                       |                                  |                  | NH L             | 03105                           |
| 2. <b>FEC IDENTIFICAT</b>      | TION NUMBER ▼               | CITY                  |                                  | ;                | STATE A          | ZIP CODE                        |
| C C00461350                    |                             | 3. IS THIS<br>REPORT  | × NEW (N)                        | OR               | AMEND<br>(A)     | STATE ▼ DISTRICT  DED  NH 01    |
| 4. TYPE OF REPO                | RT (Choose One)             |                       |                                  |                  |                  |                                 |
| (a) Quarterly Repo             |                             | (b) 12-Day <b>PRE</b> | E-Election Repo                  | ort for the:     |                  | _                               |
| April 15 Ou                    | uarterly Report (Q1)        |                       | Primary (12P                     |                  | General (1       | 2G) Runoff (12R)                |
|                                |                             |                       | Convention (                     | 12C)             | Special (1       | 2S)                             |
| △ July 15 Qu                   | arterly Report (Q2)         |                       | M M /                            | D D /            | Y Y Y Y          | in the                          |
| October 15                     | Quarterly Report (Q3)       | Election on           |                                  |                  |                  | State of                        |
| January 31                     | Year-End Report (YE)        | (c) 30-Day <b>POS</b> | T-Election Rep                   | oort for the:    |                  |                                 |
|                                |                             |                       | General (30G                     | i)               | Runoff (30       | Special (30S)                   |
| Termination                    | n Report (TER)              | Election on           | M M /                            | D D /            | Y " Y " Y        | in the State of                 |
| 5. Covering Period             | M M / D D / 01              | Y Y Y Y Y 2013        | through                          | M M 06           | / D D /          | Y Y Y Y Y 2013                  |
| I certify that I have exam     | nined this Report and to t  | the best of my kr     | nowledge and                     | belief it is tru | ue, correct and  | l complete.                     |
| Type or Print Name of 1        | reasurer Richard Springe    | er                    |                                  |                  |                  |                                 |
| Signature of Treasurer         | Richard Springer            |                       | [Electronically l                | Filed] D         | oate 07          | / D D / Y Y Y Y Y 2013          |
| NOTE: Submission of fals       | e, erroneous, or incomplete | e information may     | subject the per                  | son signing t    | his Report to th | ne penalties of 2 U.S.C. §437g. |
| Office<br>Use<br>Only          |                             |                       |                                  |                  |                  | FEC FORM 3<br>(Revised 02/2003) |

#### **SUMMARY PAGE**

of Receipts and Disbursements

2013

01

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2013

06

30

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

| I Horias of I farik Sainta | Friends of | Frank | Guinta |
|----------------------------|------------|-------|--------|
|----------------------------|------------|-------|--------|

Report Covering the Period: From: To: **COLUMN B COLUMN A** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 21.43 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 21.43 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 2177.57 70430.50 (from Line 17) ..... (b) Total Offsets to Operating 0.00 460.25 Expenditures (from Line 14)..... (c) Net Operating Expenditures 2177.57 69970.25 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 412.61 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 288995.00 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

PAGE 3 / 16

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

# Friends of Frank Guinta

|      | I. RECEIPTS   | COLUMN A<br>Total This Period           | COLUMN B<br>Election Cycle-to-Date |
|------|---|---|------------------------------------|
| 1. ( | CONTRIBUTIONS (other than loans) FROM:  |   |                                    |
| (    | a) Individuals/Persons Other Than Political Committees                                  |   |                                    |
|      | (i) Itemized (use Schedule A)   | 0.00                                    | 0.00                               |
|      | (ii) Unitemized   | 0.00                                    | 3.00                               |
|      | (iii) TOTAL of contributions from individuals   | 0.00                                    | 3.00                               |
| (    | b) Political Party Committees   | 0.00                                    | 0.00                               |
| (    | c) Other Political Committees (such as PACs)  | 0.00                                    | 18.43                              |
| `    | d) The Candidate  | 0.00                                    | 0.00                               |
|      | (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))                            | 0.00                                    | 21.43                              |
|      | TRANSFERS FROM OTHER  | 0.00                                    | 0.00                               |
| 3 I  | OANS:   | , |                                    |
|      | a) Made or Guaranteed by the  Candidate   | 0.00                                    | 0.00                               |
| (    | b) All Other Loans  | 0.00                                    | 0.00                               |
| `    | c) TOTAL LOANS (add Lines 13(a) and (b))  | 0.00                                    | 0.00                               |
|      | DFFSETS TO OPERATING  |   |                                    |
|      | EXPENDITURES Refunds, Rebates, etc.)  | 0.00                                    | 460.25                             |
|      | OTHER RECEIPTS Dividends, Interest, etc.)   | 2442.57                                 | 2442.57                            |
| 1    | TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4) | 2442.57                                 | 2924.25                            |

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

ursements

PAGE 4 / 16

|     | II. DISBURSEMENTS  | COLUMN A<br>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. | TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)       | 2177.57                       | 131430.50                       |  |  |  |  |
|     | III. CASH SL   | JMMARY                        |                                 |  |  |  |  |
| 23. | 3. CASH ON HAND AT BEGINNING OF REPORTING PERIOD                   |                               |                                 |  |  |  |  |
| 24  | TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)                  |                               |                                 |  |  |  |  |
| 25. | 5. SUBTOTAL (add Line 23 and Line 24)                              |                               |                                 |  |  |  |  |
| 26. | TOTAL DISBURSEMENTS THIS PERIOD (fro                               | m Line 22)                    | 2177.57                         |  |  |  |  |
| 27. | CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25) |                               | 412.61                          |  |  |  |  |

**1mage# 13964073157** PAGE 5 / 16

### : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

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

FOR LINE NUMBER: PAGE 6 OF 16 Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12

X 15 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) Friends of Frank Guinta Full Name (Last, First, Middle Initial) Friends of Frank Guinta Date of Receipt Mailing Address PO Box 877 2013 01 City State Zip Code Transaction ID: SA15.4132 NH 03105 Manchester FEC ID number of contributing Amount of Each Receipt this Period C00461350 federal political committee. 2442.57 Name of Employer Occupation **COH Discrepancy Correction** Receipt For: Election Cycle-to-Date Primary General 2442.57 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) 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) 2442.57 SUBTOTAL of Receipts This Page (optional)..... 2442.57 TOTAL This Period (last page this line number only).....

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full) Friends of Frank Guinta

Authorize.Net

American Fork

E-Merchant Fees

Authorize.Net

American Fork

Candidate Name

Office Sought:

State:

Purpose of Disbursement E-Merchant Fees

Candidate Name

Office Sought:

State:

City

Purpose of Disbursement

City

Full Name (Last, First, Middle Initial)

House

Senate

House Senate

District:

President

House

Senate President

District:

Full Name (Last, First, Middle Initial)

President

**PAGE** 7 16 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19b 19a Detailed Summary Page 20a 20b 20c 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. Date of Disbursement 2013 Mailing Address 808 East Utah Valley Drive 04 02 State Zip Code Amount of Each Disbursement this Period UT 84003 57.90 001 Transaction ID: SB17.4130 Category/ Type Disbursement For: 2012 M General Primary Other (specify) Date of Disbursement Mailing Address 808 East Utah Valley Drive 05 02 2013 State Zip Code Amount of Each Disbursement this Period UT 84003 57.90 001 Transaction ID: SB17.4147 Category/ Type Disbursement For: 2012 Primary General Other (specify) Date of Disbursement 2013 State Zip Code Am d

Full Name (Last, First, Middle Initial)

#### c. Authorize.Net

Office Sought:

Mailing Address 808 East Utah Valley Drive City 84003 American Fork UT Purpose of Disbursement E-Merchant Fees 001 Candidate Name Category/ Type

Disbursement For: 2012

Primary

| ount | t of | Eac | h Di | sbu | rsem | nent | this | Pe | rio |
|------|------|-----|------|-----|------|------|------|----|-----|
| _    |      | _   |      |     |      |      | _    | _  |     |

57.90

Transaction ID: SB17.4148

| State: District:                               | esident | Other (specify) |  |   |   |   |  |       |    |  |
|--|---------|-----------------|--|---|---|---|--|-------|----|--|
| SUBTOTAL of Disbursements This Page (optional) |         |                 |  |   | Ξ | Ξ |  | 173.7 | 70 |  |
| TOTAL This Period (last page                   |         |                 |  | Ξ | , |   |  |       |    |  |

X General

# S

|    | CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS                       |                                    | Use separate so<br>for each categor<br>Detailed Summa | y of the                                | FOR LINE NUMBER: PAGE 8 OF 16 (check only one)    X   17  |
|----|---|------------------------------------|---|---|---|
| or |   |                                    |   |   | person for the purpose of soliciting contributions ee to solicit contributions from such committee. |
| _  | E. H. Nicoco (Local Elizab Adiable Lettica)                       |                                    |   |   |   |
|    | Full Name (Last, First, Middle Initial) Barclays Bank of Delaware |                                    |   |   | Date of Disbursement  |
|    | Mailing Address   |                                    |   |   | 04 25 2013  |
|    | City  | State                              | Zip Code  |   | Amount of Each Disbursement this Period   |
|    | Purpose of Disbursement<br>Contested Charge                       |                                    |   | 001                                     | 1067.73<br>Transaction ID : SB17.4133   |
|    | Candidate Name  |                                    |   | Category/<br>Type                       | ,   |
|    | Office Sought:  House Senate President  State:  District:         | Disbursement For: Primary Other (s | X General   | , ,,,                                   |   |
|    | Full Name (Last, First, Middle Initial)                           |                                    |   |   |   |
| В. | Campaign Financial Services                                       | S<br>                              |   |   | Date of Disbursement  |
|    | Mailing Address PO Box 30844                                      |                                    |   |   | 04 16 2013  |
|    | City  |                                    | Amount of Each Disbursement this Period               |   |   |
|    | Bethesda Purpose of Disbursement Compliance Consulting            | MD                                 | 001   | 100.00                                  |   |
|    | Candidate Name  |                                    | Category/   | Transaction ID : SB17.4141              |   |
|    | Senate<br>President   | Disbursement For: Primary Other (s | X General   | , ,,                                    |   |
|    | State: District: Full Name (Last, First, Middle Initial)          |                                    |   |   |   |
|    | Campaign Financial Services                                       | 5                                  |   |   | Date of Disbursement  |
|    | Mailing Address PO Box 30844                                      | 04 / 16 / Y Y Y Y                  |   |   |   |
|    | City<br>Bethesda  |                                    | Amount of Each Disbursement this Period               |   |   |
|    | Purpose of Disbursement<br>Storage                                | 10.00                              |   |   |   |
|    | Candidate Name  |                                    | 001<br>Category/<br>Type                              | Transaction ID : SB17.4143  [MEMO ITEM] |   |
|    | Office Sought: House Senate President                             | Disbursement For: Primary Other (s | X General   |   |   |
|    | State: District:  |                                    |   |   |   |

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

# S

| E-Merchant Fees  Candidate Name  Office Sought: House Senate Primary General Primary General Other (specify)  B. Moneris - ACH  Mailing Address PO Box 1479  Office Sought: House Primary Other (specify)  State Zip Code Eureka CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House Senate Primary General Other (specify)  Transaction ID : SB17.4128  Date of Disbursement Image of Disbursement of Disbursement United State District:  Full Name (Last, First, Middle Initial)  Category/Type  Office Sought: House Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Disbursement Date of Disbursement United Disbursement United Date of Date of Disbursement United Date of Date  | OF 16   |
|--|---------|
| 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 CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House Primary General Primary General State: District:  Full Name (Last, First, Middle Initial)  B. Moneris - ACH  Mailing Address PO Box 1479  Office Sought: House Disbursement For: 2012  City State Zip Code Ca 95502  Purpose of Disbursement For: 2012  Senate Primary General Primary General Disbursement For: 2012  City State Zip Code CA 95502  Transaction ID: SB17.4146  Date of Disbursement  Mailing Address PO Box 1479  Office Sought: House President State: District: General Primary General Primary General Disbursement Unit Mailing Address PO Box 1479  Office Sought: House Primary General Primar | butions |
| A. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House President President State: District:  Full Name (Last, First, Middle Initial)  B. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House President CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House President CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House President Primary General Primary General Primary Category/Type  Office Sought: House Disbursement For: 2012  Senate Primary General Primary Category/Type  Office Sought: House Disbursement For: 2012  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka CA 95502  Amount of Each Disbursement  Date of Disbursement this  Date of Disbursement  Date of Disbursement  Date of Disbursement  Amount of Each Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement   |         |
| City State Zip Code Eureka CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) B. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka CA 95502  Candidate Name  Office Sought: House Senate President CA 95502  City State Zip Code Eureka CA 95502  Candidate Name  Office Sought: House Senate Primary General Other (specify)  Category/ Type  Office Sought: Disbursement this  E-Merchant Fees  Candidate Name  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Category/ Type  Office Sought: President Other (specify)  Date of Disbursement this  Date of Disbursement this  E-Merchant Fees  Outher (specify)  Date of Disbursement this  Date of Disbursement this  E-Merchant Fees  Candidate Name  Office Sought: President Other (specify)  State District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka CA 95502  Amount of Each Disbursement this  | Y       |
| Eureka CA 95502 Purpose of Disbursement E-Merchant Fees Candidate Name  Office Sought: House Senate Primary General Other (specify)  State: District: Full Name (Last, First, Middle Initial)  B. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka CA 95502  Purpose of Disbursement E-Merchant Fees Candidate Name  Office Sought: House Primary General Other (specify)  Category/ Type  Transaction ID: SB17.4128  Date of Disbursement  Amount of Each Disbursement this  E. Moneris - ACH  Other (specify)  State: District: Primary General Other (specify)  State: District: Primary General Other (specify)  State: District: Primary General Other (specify)  State: District: Primary ACH  Mailing Address PO Box 1479  City State Zip Code  Mailing Address PO Box 1479  City State Zip Code  Amount of Each Disbursement this  Date of Disbursement  Amount of Each Disbursement  Date of Disbursement  Amount of Each Disbursement  Date of Disbursement  Date of Disbursement  Amount of Each Disbursement this  |         |
| E-Merchant Fees  Candidate Name  Office Sought: House Senate Primary General Primary General Other (specify)  B. Moneris - ACH  Mailing Address PO Box 1479  Office Sought: House Primary Other (specify)  State Zip Code Eureka CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House Senate Primary General Other (specify)  Transaction ID : SB17.4128  Date of Disbursement Image of Disbursement of Disbursement United State District:  Full Name (Last, First, Middle Initial)  Category/Type  Office Sought: House Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Disbursement Date of Disbursement United Disbursement United Date of Date of Disbursement United Date of Date  | Period  |
| Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  B. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House Primary General Other (specify)  Transaction ID : SB17.4146  Date of Disbursement this Category/ Type  Transaction ID : SB17.4146  Date of Disbursement this Category/ Type  Office Sought: House Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code CA 95502  Amount of Each Disbursement this Date of Disbursement Tor: 2012  Date of Disbursement Tor: 2012  Amount of Each Disbursement Tor: 2012  Date of Disbursement Tor: 2013  Date of Disbursement Tor: 2013  Amount of Each Disbursement Tor: 2013  Date of Disbursement Tor: 2013   | 1.90    |
| Office Sought: House Senate Primary General Primary General Other (specify)  State: District: Full Name (Last, First, Middle Initial)  B. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House Senate Primary General Other (specify)  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Category/ Type  Other (specify)  Date of Disbursement this  Transaction ID: SB17.4146  Date of Disbursement this  Category/ Type  Other (specify)  Amount of Each Disbursement this  Category/ Type  Other (specify)  Amount of Each Disbursement this  Date of Disbursement Category  |         |
| Full Name (Last, First, Middle Initial)  Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House President Primary Category/ Type  Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Mailing Address PO Box 1479  City State Zip Code CA 95502  Amount of Each Disbursement this  Date of Disbursement this  Date of Disbursement this  Amount of Each Disbursement this   |         |
| Mailing Address PO Box 1479  City State Zip Code Eureka CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Mailing Address PO Box 1479  City State Zip Code Eureka CA 95502  Amount of Each Disbursement this  Amount of Each Disbursement this   |         |
| Eureka  CA 95502  Purpose of Disbursement E-Merchant Fees  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka  CA 95502  Amount of Each Disbursement Initial  Date of Disbursement  Mamma / Date of Disbursement  Amount of Each Disbursement this  | Υ       |
| Purpose of Disbursement E-Merchant Fees  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka  CA 95502  Transaction ID : SB17.4146  Date of Disbursement  Amount of Each Disbursement this   | Period  |
| Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka  CA 95502  Category/ Type  Date of Disbursement  Amount of Each Disbursement this  | 1.90    |
| Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code CA 95502  Amount of Each Disbursement this   |         |
| Full Name (Last, First, Middle Initial)  C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka  CA 95502  Date of Disbursement  Amount of Each Disbursement this   |         |
| C. Moneris - ACH  Mailing Address PO Box 1479  City State Zip Code Eureka  CA 95502  Date of Disbursement  Amount of Each Disbursement this  |         |
| Mailing Address PO Box 1479  City State Zip Code Amount of Each Disbursement this Eureka CA 95502  Amount of Each Disbursement this  |         |
| Eureka CA 95502  | Υ       |
|  | Period  |
| Purpose of Disbursement E-Merchant Fees 001  | 1.90    |
| Candidate Name  Category/ Type  Transaction ID : SB17.4149   |         |
| Office Sought:  House  Disbursement For: 2012  Senate  President  Disbursement For: 2012  Other (specify)  |         |
| State: District:   |         |

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

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

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|    | CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS   |   | Use separate sch<br>for each category<br>Detailed Summar | of the            | FOR LINE NUMBER: PAGE 10 OF 16 (check only one)    X   17  |
|----|---|---|--|-------------------|--|
|    |   |   |  |                   | person for the purpose of soliciting contributions e to solicit contributions from such committee. |
|    | NAME OF COMMITTEE (In Full)  Friends of Frank Guinta                                    | -                                       |  |                   |  |
| Α. | Full Name (Last, First, Middle Initial) TD Bank   |   |  |                   | Date of Disbursement   |
|    | Mailing Address 300 Franklin Street   |   |  |                   | 06 12 2013   |
|    | City<br>Manchester  | State<br>NH                             | Zip Code<br>03101  |                   | Amount of Each Disbursement this Period  |
|    | Purpose of Disbursement<br>Banking Service Fee  |   |  | 001               | 15.00<br>Transaction ID : SB17.4153  |
|    | Candidate Name  |   |  | Category/<br>Type | Transaction in . 3517.4133   |
|    | Office Sought: House Senate President   | Disbursement For<br>Primary<br>Other (s | X General  |                   |  |
|    | State: District:  |   |  |                   |  |
| В. | Full Name (Last, First, Middle Initial)  Verizon Wireless  Mailing Address PO Box 15062 |   |  |                   | Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                |
|    | City  | State                                   | Zip Code   |                   | Amount of Each Disbursement this Period  |
|    | Albany  | NY                                      | 12212  |                   |  |
|    | Purpose of Disbursement<br>Cellular Phone Service                                       |   |  | 001               | 414.42<br>Transaction ID : SB17.4125   |
|    | Candidate Name  |   |  | Category/<br>Type |  |
|    | Office Sought: House Senate President   | Disbursement For<br>Primary<br>Other (s | X General  |                   |  |
|    | State: District:  |   |  |                   |  |
| C. | Full Name (Last, First, Middle Initial) Wells Fargo Bank                                |   |  |                   | Date of Disbursement   |
|    | Mailing Address 7901 Wisconsin Avenue   |   |  |                   | 04 / D D / Y Y Y Y Y Y 11 2013   |
|    | City<br>Bethesda  |   | p Code<br>20814  |                   | Amount of Each Disbursement this Period  |
|    | Purpose of Disbursement<br>Banking Service Fee  |   | 001  | 10.50             |  |
|    | Candidate Name  |   |  | Category/<br>Type | Transaction ID : SB17.4123   |
|    | Office Sought: House Senate President   | Disbursement For<br>Primary<br>Other (s | X General  |                   |  |
|    | State: District:  |   |  |                   |  |
|    |   |   |  |                   | 439.92   |

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

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

# SCHEDULE B (FEC Form 3)

**PAGE** 11 16 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) Date of Disbursement Wells Fargo Bank 2013 Mailing Address 7901 Wisconsin Avenue 05 13 Zip Code City State Amount of Each Disbursement this Period MD Bethesda 20814 Purpose of Disbursement 10.50 Banking Service Fee 001 Transaction ID: SB17.4150 Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House X General Senate Primary Other (specify) President District: State: Full Name (Last, First, Middle Initial) Wells Fargo Bank Date of Disbursement Mailing Address 7901 Wisconsin Avenue 06 2013 11 City State Zip Code Amount of Each Disbursement this Period MD 20814 Bethesda 10.50 Purpose of Disbursement Banking Service Fee 001 Transaction ID: SB17.4152 Candidate Name Category/ Type Disbursement For: Office Sought: House 2012 Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City Zip Code State Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 21.00 SUBTOTAL of Disbursements This Page (optional).....

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

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Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) Detailed Summary Page Transaction ID: SC/10.4110 NAME OF COMMITTEE (In Full) Friends of Frank Guinta LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2010 [PERSONAL FUNDS] Primary Frank Guinta General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 877 City State ZIP Code NH 03105 Manchester Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 100000.00 46500.00 53500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 03<sup>M</sup> <sup>D</sup>28<sup>D</sup> Ž010 0.00 Ňoně % (apr) 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 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)..... 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4113 NAME OF COMMITTEE (In Full) Friends of Frank Guinta LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2010 [PERSONAL FUNDS] Primary Frank Guinta General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 877 City State ZIP Code NH 03105 Manchester Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 125000.00 0.00 125000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 06<sup>M</sup> Ž010 0.00 Ňoně % (apr) 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 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)..... 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.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.4114 NAME OF COMMITTEE (In Full) Friends of Frank Guinta LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2010 [PERSONAL FUNDS] Primary Frank Guinta General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 877 City State ZIP Code NH 03105 Manchester Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 60000.00 0.00 60000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 09<sup>M</sup> 03 Ž010 0.00 Ňoně % (apr) 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 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)..... 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.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.4115 NAME OF COMMITTEE (In Full) Friends of Frank Guinta LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2010 [PERSONAL FUNDS] Primary Frank Guinta General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 877 City State ZIP Code NH 03105 Manchester Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 09<sup>M</sup> <sup>D</sup>10<sup>D</sup> Ž010 0.00 Ňoně % (apr) 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 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)..... 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)

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NAME OF COMMITTEE (In Full) Friends of Frank Guinta A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Compliance Consulting Campaign Financial Services Mailing Address PO Box 30844 Zip Code City Bethesda MD 20824 Transaction ID: SD10.4145 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 385.00 0.00 385.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Compliance Consulting Campaign Financial Services Mailing Address PO Box 30844 Zip Code City State Bethesda MD 20824 Outstanding Balance Beginning This Period Transaction ID: SD10.4151 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 110.00 0.00 110.00 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 495.00 1) SUBTOTALS This Period This Page (optional)..... 495.00 TOTALS This Period (last page this line number only)..... 288500.00 TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 288995.00 ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)