PAGE 1 / 62

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		Authorized Cor				Office Use Only
NAME OF COMMITTEE (in a	TYPE OR PRII	•	xample: If typir ver the lines.	g, type	12FE4M5	
Mark Greenber	g for Congress					1
	. 50 Davis Di					
ADDRESS (number and	d street) 53 Peck Rd					
Check if diffe	erent					
than previou reported. (AC					СТ	06790-6106
2. FEC IDENTIFIC	ATION NUMBER ▼	CITY			STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00493399	5	3. IS THIS REPORT	NEW (N)	OR	× AMEND (A)	
		1				
4. TYPE OF REP(a) Quarterly Re	PORT (Choose One)	(b) 12-Day PR	E -Election Repo	ort for the:		
			Primary (12P)	General (1	2G) Runoff (12R)
April 15	Quarterly Report (Q1)		Convention (12C)	Special (1	2S)
July 15	Quarterly Report (Q2)		M M	D D /	Y Y Y Y Y	in the
October	15 Quarterly Report (Q3)	Election or	1			State of
X January	31 Year-End Report (YE)	(c) 30-Day PO	ST-Election Re	port for the:		
			General (300	i)	Runoff (30	DR) Special (30S)
Terminat	ion Report (TER)	Election or	M M M	D D /	Y	in the State of
5. Covering Period	11 / D D D 25	/ Y Y Y Y 2014	through	M M 12	/ D D /	Y Y Y Y 2014
I certify that I have ex	camined this Report and	to the best of my k	nowledge and	belief it is tru	ue, correct and	d complete.
Type or Print Name o	f Treasurer J. Kenneth I	Nowell				
Signature of Treasurer	J. Kenneth Nowell		[Electronically	Filed] D	ate 07	/ D D / Y Y Y Y Y 2015
NOTE: Submission of f	alse, erroneous, or incomp	olete information may	subject the per	son signing t	his Report to the	he penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

PAGE 2 / 62

Write or Type Committee Name

Mark Greenberg for Congress

11 12 31 2014 25 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 14600.00 414829.86 (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) 14600.00 392623.75 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 14580.13 1754527.62 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 14580.13 1754527.62 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 606.68 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 1907167.31 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 / 62 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Mark Greenberg for Congress

25 2014 12 2014 Report Covering the Period: From: To:

I. R	ECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. CONTRIBUTIONS	G (other than loans) FROM:		
` '	Persons Other Than		
Political Cor (i) Itemized	nmittees (use Schedule A)	0.00	268531.11
` '	ed	0.00	25668.75
	f contributions	0.00	294199.86
	ty Committees	0.00	5500.00
` '	al Committees Cs)	0.00	26500.00
(e) TOTAL CON	ate TRIBUTIONS	14600.00	88630.00
(other than I (add Lines 1	1(a)(iii), (b), (c), and (d))	14600.00	414829.86
2. TRANSFERS FRO AUTHORIZED CO	OM OTHER DMMITTEES	0.00	0.00
3. LOANS:	avanta ad law tha		
` '	aranteed by the	0.00	1659300.00
, ,	ans	0.00	0.00
(c) TOTAL LOAI (add Lines 1	NS 3(a) and (b))	0.00	1659300.00
4. OFFSETS TO OF	PERATING		
EXPENDITURES (Refunds, Rebate	es, etc.)	0.00	0.00
5. OTHER RECEIPT (Dividends, Interes	S est, etc.)	0.00	1310.58
6. TOTAL RECEIP1 11(e), 12, 13(c), (Carry Total to Li		14600.00	2075440.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 62

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	14580.13	1754527.62
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
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	14580.13	2056733.73
	III. CASH SL	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	586.81
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	14600.00
25.	SUBTOTAL (add Line 23 and Line 24)		15186.81
:6.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	14580.13
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		606.68

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 5 OF 62 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 2014 11 City State Zip Code Transaction ID: A0DEEBA472DCD4DEB9C2 CT 06759-2721 Litchfield FEC ID number of contributing Amount of Each Receipt this Period H0CT05150 federal political committee. 2100.00 Name of Employer Occupation campaign contribution Mark Greenberg Real Estate Real Estate Developer Receipt For: 2014 Election Cycle-to-Date Primary X General 1736730.00 Other (specify) Full Name (Last, First, Middle Initial) Mark Greenberg Date of Receipt Mailing Address 184 Fern Ave 03 2014 City State Zip Code Transaction ID: A14691063DF514F79B8E Litchfield CT 06759-2721 FEC ID number of contributing Amount of Each Receipt this Period С H0CT05150 federal political committee. 12500.00 Name of Employer Occupation Real Estate Developer campaign contribution Mark Greenberg Real Estate Receipt For: 2014 Election Cycle-to-Date Primary ✓ General 1734630.00 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) 14600.00 SUBTOTAL of Receipts This Page (optional)..... 14600.00

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

S

""	lage# 20130726900	0430101				
	CHEDULE B EMIZED DIS	•	•	Use separate sol for each categor Detailed Summa	nedule(s) (y of the	FOR LINE NUMBER: PAGE 6 OF 62 check only one) X 17
	,			,	, , ,	erson for the purpose of soliciting contributions to solicit contributions from such committee.
01	NAME OF COMMI	•	ising the name and a	address of any por	tical committee	to solicit contributions from such committee.
	Mark Greent	perg for Cong	ress			
Α.	Full Name (Last, Fi	irst, Middle Initial) ent of Revenu	e Services			Date of Disbursement
A.						M = M / D = D / Y = Y = Y
	Mailing Address P	O Box 2931				12 15 2014
	City		State	Zip Code		Amount of Each Disbursement this Period
	Hartford		СТ	06104-2931		111 70
	Purpose of Disburs CT payroll tax	sement			001	111.78
	Candidate Name				Category/ Type	Transaction ID: B0005462E36A04E17BBE
	Office Sought:	House Senate President	Disbursement For Primary Other (s	X General	, , , , , , , , , , , , , , , , , , ,	
_	State: Full Name (Last, Fi	District:				
В.	United State Mailing Address P	s Treasury				Date of Disbursement
	а	O BOX 604521				12 15 2014
	City Cincinnati		State OH	Zip Code 45280-4521		Amount of Each Disbursement this Period
	Purpose of Disburs 941 Federal payro				001	1996.60 Transaction ID : BD7C53B283F424033BA5
	Candidate Name				Category/ Type	Transaction ib . Bb/ 033b203i 424033bA3
	Office Sought: State:	House Senate President District:	Disbursement For Primary Other (s	X General		
	Full Name (Last, Fi	irst, Middle Initial)	•			
C.	J. Kenneth N	lowell				Date of Disbursement
	Mailing Address 5	3 Peck Road				12 01 2014
	City			p Code		Amount of Each Disbursement this Period
	Torrington Purpose of Disburs	sement	CT 0	6790-6106		4000.00
	Debt Repayment: Candidate Name	event supplies, facili	ty rental, catering, be	verages	007 Category/ Type	Transaction ID : BAACC2071532245FA8EE
	Office Sought:	House Senate President	Disbursement For Primary Other (s	X General	1,700	

State:

District:

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

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

6108.38

S

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		-			FOR LINE NUMBER: PAGE 7 OF 62 (check only one) X 17
					erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Mark Greenberg for Cor	ngress			
Α.	Full Name (Last, First, Middle Initia J. Kenneth Nowell)			Date of Disbursement
	Mailing Address 53 Peck Road				12 05 2014
	City Torrington	State CT	Zip Code 06790-6106		Amount of Each Disbursement this Period
	Purpose of Disbursement Debt Repayment: event supplies, fa	acility rental, catering, be	verages	007	442.90 Transaction ID : B3FF75881A953402FBC0
	Candidate Name			Category/ Type	
	Office Sought: House Senate President	Disbursement For Primary Other (s	X General		
_	State: District: Full Name (Last, First, Middle Initia	1)			
В.	Riverhouse Catering Mailing Address 1 Nod Road				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
	Avon Purpose of Disbursement	СТ	06001-3819		1796.90
	catering election day			007	Transaction ID : BDF6EC1E19EDE4AFA82A
	Candidate Name			Category/ Type	[MEMO ITEM]
	Office Sought: House Senate President	Disbursement For Primary Other (s	X General		
	State: District:				
c.	Full Name (Last, First, Middle Initial Palace Theater)			Date of Disbursement
	Mailing Address 100 E Main Street				11 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Waterbury		ip Code 06702-2312		Amount of Each Disbursement this Period
	Purpose of Disbursement facility rental and beverages			007	2646.00
	Candidate Name			Category/ Type	Transaction ID : BD853C9BE8BCB4940871 [MEMO ITEM]
	Office Sought: House Senate President	Disbursement For Primary Other (s	X General	,	[mains real]
	State: District:				
					442.90

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

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LIN	IE NUMBE	R:		PAG	ЭE	8	OF	62
Use separate schedule(s)	(check c	only one)							
for each category of the	[X 17		18		٦.	19a		19b
Detailed Summary Page		20a		20b			20c		21
ay not be sold or used by any person for the purpose of soliciting contributions address of any political committee to solicit contributions from such committee.									

TENNIED DIODONOLINENTO	Detailed Summary F	Page	20a 20b 20c 21
Any information copied from such Reports and Statements mor 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	address of any pointer	ai committee t	o constructions from such committee.
Full Name (Last, First, Middle Initial) A. KB Strategic Group Mailing Address PO Box 101683			Date of Disbursement 12 01 2014
Mailing Address PO Box 101682	Zip Code		
City State Arlington VA Purpose of Disbursement Distribution accounts to a consultant	22210-4682		Amount of Each Disbursement this Period 1850.00
Debt Repayment: fundraising consultant Candidate Name	l	003 Category/ Type	Transaction ID: B40AE97D442C3446CBF4
Office Sought: House Senate Primary President State: Disbursement For Office Sought: Other (s	General	Турс	
Full Name (Last, First, Middle Initial) 3. William J Evans			Date of Disbursement
Mailing Address 325 Celia Drive City State Wolcott CT	Zip Code 06705-3153		Amount of Each Disbursement this Period
Purpose of Disbursement Debt Repayment: General Consultant Candidate Name		001 Category/	4500.00 Transaction ID : B0DF28027803041C5969
Office Sought: House Senate President State: Disbursement For Primary Other (s	General	Туре	
Full Name (Last, First, Middle Initial) C. Maeve McHugh			Date of Disbursement
Mailing Address PO Box 507			M M / D D / Y Y Y Y 12 12 03 2014
	ip Code 06357-0507		Amount of Each Disbursement this Period 78.85
Debt Repayment: Mileage reimbursement Candidate Name		002 Category/ Type	Transaction ID : BFB2A20BE5EA1471C8CD
Office Sought: House Senate President State: Disbursement For Primary Other (s	General		
SUBTOTAL of Disbursements This Page (optional)			6428.85
TOTAL This Period (last page this line number only)			, ,

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE	PAGE	9	OF	62			
Use separate schedule(s)	(check only one)							
for each category of the	×	17		18		19a		19b
Detailed Summary Page		20a		20b		20c		21
y not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee.								

Any information copied from such Reports and Statements may not be sold or used by ar or for commercial purposes, other than using the name and address of any political commercial purposes.	
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress	
Full Name (Last, First, Middle Initial) A. David Derwin Mailing Address 1313 Grand Street	Date of Disbursement 12 01 2014
City State Zip Code Hoboken NJ 07030-2252 Purpose of Disbursement Debt Repayment: production costs TV ad Candidate Name Categor Type Office Sought: House Disbursement For: 2014 Senate Primary General President Other (specify)	
Full Name (Last, First, Middle Initial) B. Mailing Address	Date of Disbursement
City State Zip Code Purpose of Disbursement Candidate Name Category Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District:	
Full Name (Last, First, Middle Initial) C. Mailing Address	Date of Disbursement
City State Zip Code Purpose of Disbursement Candidate Name Category Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District:	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)	14480.13

Use separate schedule(s)

FOR LINE NUMBER: (check only one)

PAGE

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for each category of the **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 Detailed Summary Page

FOR LINE NUMBER: (check only one)

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13a 13b

		Detailed Guiriniary i a	13b
NAME OF COMMITTEE (In Full)		Transa	ction ID : C55D484FE54D34017B00
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)
City	State ZIP C	ode	
Litchfield	CT 06759	9-2721	
Original Amount of Loan	Cumulative Payment T	o Date Bal	ance Outstanding at Close of This Period
65000.00		0.00	65000.00
TERMS Date Incurred	Date Due	e Interest Rat	e Secured:
M10 ^M / D23 ^D / Y 2014 Y	M M / D D / Y	None Y 0.0	
List All Endorsers or Guarantors (if a	ny) to Loan Source		103 110
1. Full Name (Last, First, Middle Initial	l)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	te ZIP Code	Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	te ZIP Code	Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	te ZIP Code	Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	ite ZIP Code	Guaranteed Outstanding:	9 9 9
SUBTOTALS This Period This Page (option	anal)		65000 00
TOTALS This Period (last page in this line			65000.00
To the control of the			9 9
Carry outstanding balance only to LINE 3	3, Schedule D, for this line. I	f no Schedule D, carry for	ward 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

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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: ^M06^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		, , , , , ,	_
TERMS Date Incurred	Date Due	Interest Ra	ate Secured:	
M 08 / D 15 / 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:		
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))	·····	12500.00	
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

FOR LINE NUMBER: (check only one)

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×		13a
		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

FOR LINE NUMBER: (check only one)

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X 13a

OF

		Detailed Cultilliary 1 8	ige	13b
NAME OF COMMITTEE (In Full)		Transa	action ID : CD07EFD888A3B4648	AE3
Mark Greenberg for Congress				
LOAN SOURCE Full Name (Last, First, Middle I Mark Greenberg	nitial)	[PERSONAL FUNDS]	Election: 2014 Primary General	
Mailing Address 184 Fern Ave			Other (specify) ▼ Convention2014	
City Stat	e ZIP Code			
Litchfield C1	Г 06759-272	21		
Original Amount of Loan Cu	mulative Payment To Da	ote Ba	lance Outstanding at Close of Thi	
TERMS	7 7		7 7	
Date Incurred M 11 M / P 26 P / Y 2013 Y M M	Date Due	Interest Ra		No
List All Endorsers or Guarantors (if any) to Loa	an Source			
1. Full Name (Last, First, Middle Initial)	N	lame of Employer		
Mailing Address	C	Occupation		
City State ZI	P Code	mount Guaranteed Outstanding:	7	
2. Full Name (Last, First, Middle Initial)	N	lame of Employer		
Mailing Address	C	Occupation		
City State ZI	P Code	mount Guaranteed Outstanding:	7 1 7 1 7	
3. Full Name (Last, First, Middle Initial)	N	lame of Employer		
Mailing Address	C	Occupation		
City State ZI	P Code	amount Guaranteed		1
4. Full Name (Last, First, Middle Initial)		Outstanding: Jame of Employer	/	
Mailing Address		Occupation		
	_			
City State ZI	P Code G	mount Guaranteed Outstanding:	7 1 7 1 7	
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3, Schedul	e D. for this line. If no	Schedule D. carry for	ward to appropriate line of Sun	nmarv.

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: CB60CC071A86C4A02B17 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 15000.00 0.00 15000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^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)..... 15000.00 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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	Detailed Summary Page 13b
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 F	Payment To Date Balance Outstanding at Close of This Period 0.00 10000.00
TERMS Date Incurred	Date Due Interest Rate Secured:
M 06 ^M / D 04 ^D / Y 2013 Y	O.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source	e
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed
Only State Zii Sode	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)	10000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for t	nis line. If no Schedule D, carry forward to appropriate line of Summary.

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	Detailed Summary Fage	13b
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress	Transaction ID : C	F8A2925E3D2E4806B3C
LOAN SOURCE Full Name (Last, First, Middle Initial) Mark Greenberg	[PERSONAL FUNDS] Election: Prim Gene	ary eral
Mailing Address 184 Fern Ave	Othe —	er (specify) \blacktriangledown
City State	ZIP Code	
Litchfield CT	06759-2721	
Original Amount of Loan Cumulat	ve Payment To Date Balance Outsta	75000.00
Date Incurred M07M / P25D / Y 2012 M M M /		Secured: (apr) Secured: Yes No
List All Endorsers or Guarantors (if any) to Loan Solution 1. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Co	Amount Guaranteed Outstanding:	9
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Co	Amount Guaranteed Outstanding:	9
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Co	Amount Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Co	Amount Guaranteed Outstanding:	9 1 2
SUBTOTALS This Period This Page (optional)		
TOTALS This Period (last page in this line only)	······	
Carry outstanding balance only to LINE 3, Schedule D,	or this line. If no Schedule D, carry forward to ap	propriate line of Summary.

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

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		Detailed Gairi	1
ME OF COMMITTEE (In Full)	20		Transaction ID : CECBA7AF2579C4725B29
lark Greenberg for Congre			
LOAN SOURCE Full Name (Last,	First, Middle Initial)	[PERSONAL F	
Mark Greenberg			Primary General
Mailing Address			Other (specify)
184 Fern Ave			
City	State	ZIP Code	
Litchfield	СТ	06759-2721	
Original Amount of Loan	Cumulative Pa	ayment To Date	Balance Outstanding at Close of This P
23500	000	105000.00	120000 00
23300	5.00	103000.00	130000.00
TERMS Date Incurred		Date Due Inte	erest Rate Secured:
			0.00
M 06 M / D 30 D / Y 2014		/ Y Ňone Y	% (apr)
List All Endorsers or Guarantors	(if any) to Loan Source)	Yes
1. Full Name (Last, First, Middle I	* **	Name of Employ	ver
A4 '''		0	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed	
		Outstanding:	7
2. Full Name (Last, First, Middle Ir	itial)	Name of Employ	/er
Mailing Address		Occupation	
		Amazaumh	
City	State ZIP Code	Amount Guaranteed	
City	State ZIF Code	Outstanding:	7
3. Full Name (Last, First, Middle Ir	itial)	Name of Employ	ver
Mailing Address		Occupation	
3			
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	9 9
4. Full Name (Last, First, Middle In	itial)	Name of Employ	/er
Nation Address			
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed	
		Outstanding:	
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Use separate schedule(s) for each category of the

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DANS		Detailed Summary Pag	
AME OF COMMITTEE (In Full) Mark Greenberg for Congress		Transac	tion ID : CA2C1E440008A41FDB5E
LOAN SOURCE Full Name (Last, First, Mid	Idle Initial)	[PERSONAL FUNDS]	Election: 2014
Mark Greenberg			Primary General
Mailing Address 184 Fern Ave			Other (specify)
City	State ZIP Cod	de	
Litchfield	CT 06759-2	2721	
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
TERMS Date Incurred M 06 / D 16 / Y 2014 Y	Date Due	Interest Rate	
List All Endorsers or Guarantors (if any) to	o Loan Source	Name of Freeless	
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This Page (optional)		—— <u> </u>	15000.00

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NAME OF COMMITTEE (In Full) Mark Greenberg for Congress		Transac	tion ID : C0528A3D351754D3BB6C
LOAN SOURCE Full Name (Last, First, Mic Mark Greenberg Mailing Address 184 Fern Ave	ddle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General Other (specify) ▼ Convention2014
City	State ZIP Co	ode	
Litchfield	CT 06759-	2721	
Original Amount of Loan	Cumulative Payment To	Date Bala	unce Outstanding at Close of This Period 8000.00
TERMS	7	7	<u> </u>
Date Incurred M11 / P13 / Y 2013 Y	Date Due	None Interest Rate	
List All Endorsers or Guarantors (if any) t	o Loan Source	,	
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstandings	7
2. Full Name (Last, First, Middle Initial)		Outstanding: Name of Employer	,
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	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
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
	710.0	Amount	
City State	ZIP Code	Guaranteed Outstanding:	9 1 9 1
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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: C71137021C269419383D 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: ^M06^M ^D18 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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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.

Use separate schedule(s) FOR LINE NUMBER: for each category of the **X** 13a (check only one) 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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Transaction ID: C8120BECF32A9412997B 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 09^M ^D16 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)..... 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.

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Detailed Summary Page Transaction ID: C538F7BD086F14626BF2 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 15000.00 0.00 15000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 23 ^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 State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 15000.00 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: 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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AME OF COMMITTEE (In Fu					Transac	tion ID : C	2530A505I	36DB44D0	89F
Mark Greenberg for C	Congress								
LOAN SOURCE Full Nam	ne (Last, First, Midd	lle Initial)		[PERSON/	AL FUNDS]	Election:			
Mark Greenberg						Prim Gen	•		
Mailing Address 184 Fern Ave							er (specify) ation2014	▼	
City	5	State	ZIP Cod	9					
Litchfield		СТ	06759-2	721					
Original Amount of Loan		Cumulative P	ayment To [Date	Bala	ince Outst	anding at C	lose of Th	nis Period
	10000.00			0.0	00			10000	0.00
TERMS Date Incurr	ed		Date Due		Interest Rate	<u> </u>		Secured	:
M ₀₁ M / D ₂₈ D / N	Ž014 Y			None Y	0.00		∕₀ (apr)	Yes	X No
List All Endorsers or Gua	arantors (if any) to	Loan Source	9					100	140
1. Full Name (Last, First,	Middle Initial)			Name of Em	nployer				
Mailing Address				Occupation					
				Amount					_
City	State	ZIP Code		Guaranteed Outstanding		7	7		
2. Full Name (Last, First, I	Middle Initial)			Name of Em	nployer				
Mailing Address				Occupation					
				Amount					7
City	State	ZIP Code		Guaranteed Outstanding	. —	7	7	-	
3. Full Name (Last, First, I	Middle Initial)			Name of Em	nployer				
Mailing Address				Occupation					
				Amount	_				7
City	State	ZIP Code		Guaranteed Outstanding		7	7	- W	
4. Full Name (Last, First, I	Middle Initial)			Name of Em	nployer				
Mailing Address				Occupation					
				Amount	-				_
City	State	ZIP Code		Guaranteed Outstanding		7	7	W. I	
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Carry outstanding balance o	nly to LINE 3 Sche	dule D for th	nis line If n	o Schedule	D. carry for	vard to ar	nronriate	ine of Su	mmarv

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for each category of the **X** 13a 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 Amount State ZIP Code Guaranteed City Outstanding: 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.

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Transaction ID: CC107E489D0E64C9083D 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 21000.00 0.00 21000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} 04 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)..... 21000.00 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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		Detailed Summary F	rage	13b
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress		Trans	action ID : CFD73008F64174859A	74
· ·	1.11. 1.21. 1/2			
LOAN SOURCE Full Name (Last, First, Mic Mark Greenberg	ddle Initial)	[PERSONAL FUNDS]	Primary General	
Mailing Address 184 Fern Ave			Other (specify) ▼ Convention2012	
City	State ZIP Coc	le		
Litchfield	CT 06759-2	721		
Original Amount of Loan 500000.00	Cumulative Payment To	Date B	alance Outstanding at Close of Thi	-
TERMS Data laguirrad	Data Dua	Interest D	oto Conurado	
Date Incurred Mo3 ^M / D31 ^D / Y Ž01Ž Y	Date Due	None Interest R	ate Secured: 00 % (apr) Yes	No
List All Endorsers or Guarantors (if any) t	o Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9]
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		1
City State	ZIP Code	Guaranteed Outstanding:	9 9	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount Guaranteed		1
City State	ZIP Code	Outstanding:	7 7	_
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		_
City State	ZIP Code	Guaranteed Outstanding:	9 9 9 9 9 9	
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TOTALS This Period (last page in this line only	/)	·····		
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Transaction ID: CD1D81F253F794C4188B 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: ^M 06^M 03 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: CF9D2816C62954C8CB87 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: ^M 02^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)..... 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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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.

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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: ^D30 ^M 06^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 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.

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Transaction ID: C762400101B594EFB9BE 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 97400.00 0.00 96000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M 03 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)..... 96000.00 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: 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 ^M 12^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)..... 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.

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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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Detailed Summary Page 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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Transaction ID: C4C5EFE472C5D4BD6A5D 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: ^D 19^D ^M08^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)..... 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.

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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.

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AME OF COMMITTEE (In Ful	•		· ·		Transa	action I	D : C80BBC0	D174A540	CF79D4
Mark Greenberg for C	ongress								
LOAN SOURCE Full Name	e (Last, First, Mid	Idle Initial)	I	PERSONA	AL FUNDS]	Elec	tion: 2014 Primary		
Mark Greenberg							General		
Mailing Address 184 Fern Ave							Other (specify	√) ▼	
City		State 2	ZIP Code						
Litchfield		СТ	06759-272						
Original Amount of Loan		Cumulative Paym	ment To Dat	е	Ва	lance C	Outstanding at	Close of	This Perio
7 7	33000.00		,	0.0	0		,	330	00.00
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M 10 / 29 D / Y	ž014 ^Y	M M / D D	/ Y Ňo	ne Y	0.0	_	% (apr)	Y	es N
List All Endorsers or Gua	rantors (if any) to	Loan Source							<u> </u>
1. Full Name (Last, First, I	Middle Initial)		Na	me of Em	nployer				
Mailing Address			Oc	cupation					
City	State	ZIP Code	Gu	nount Jaranteed Jitstanding:		7	7		
2. Full Name (Last, First, M	fiddle Initial)		Na	ime of Em	nployer				
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varry outstanding Dalance of	HV LU LINE J. JCN	reduie D, IUI LIIIS I	mie. II IIO 3	JUICUUIC	D. Cally 10	ı vvalu l	o appropriate	- IIII UI 🔻	oummilary.

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ly one)	×	13a
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Transaction ID: CD4115B528CF14546B50 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 6000.00 0.00 6000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M ^D 11 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)..... 6000.00 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: 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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Transaction ID: C1EF3F3C5664D40EF8FF 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 171400.00 175000.00 3600.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M 03 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)..... 3600.00 1811500.00 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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(chec numbered line) **Excluding Loans** NAME OF COMMITTEE (In Full) Mark Greenberg for Congress A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Federal Unemployment Tax 940 2014 United States Treasury Mailing Address PO Box 804521 Zip Code City Cincinnati ОН 45280-4521 Transaction ID: D216EAF7E2AD24A66974 Outstanding Balance Beginning This Period 60.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 60.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FUTA tax liability for April, 2014 United States Treasury Mailing Address PO Box 804521 Zip Code City State Cincinnati OH 45280-4521 Outstanding Balance Beginning This Period Transaction ID: D8B7CBE00F350451FBB1 9.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 9.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Federal Unemployment Tax Liability May/June **United States Treasury** 2014 Mailing Address PO Box 804521 City State Zip Code ОН Cincinnati 45280-4521 Transaction ID: D24B60991837B413BB59 Outstanding Balance Beginning This Period 83.82 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.0083 82 152.82 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

Excluding Loans

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David Derwin	Nature of Debt (Purpose): production costs TV ad		
Mailing Address 1313 Grand Street Apt. 205			
City State	Zip Code		
Hoboken	NJ	07030-2252	
Outstanding Balance Beginning This Period 1500.00			Transaction ID : DB29C8BFA63B34E22B35
Amount Incurred This Period	Payr	nent This Period	Outstanding Balance at Close of This Period
0.00	7	1500.00	0.00
B. Full Name (Last, First, Middle Initial) of Debte Dey Smith Steele, LLC Mailing Address 9 Depot Street	or or Creditor		Nature of Debt (Purpose): legal fees
Floor 2			
City State Milford	Zip Code CT	06460-3357	
Outstanding Balance Beginning This Period 13325.00			Transaction ID : DD5AB8843219C4795900
Amount Incurred This Period	Payr	nent This Period	Outstanding Balance at Close of This Period
			42225.00
0.00	7	0.00	13325.00
C. Full Name (Last, First, Middle Initial) of Deb Theroux, Nowell & Stoughton, L		0.00	Nature of Debt (Purpose): accounting and software
0.00 C. Full Name (Last, First, Middle Initial) of Deb		0.00	Nature of Debt (Purpose):
C. Full Name (Last, First, Middle Initial) of Deb Theroux, Nowell & Stoughton, L		0.00 Zip Code	Nature of Debt (Purpose):

1) SUBTOTALS This Period This Page (optional)		•				7		Ξ	7	Ξ	1997	79.2	5
2) TOTALS This Period (last page this line number only)		•		_	_	7	_	_	,	_	_	_	\Box
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).		>	Ļ	_	-	7	-	÷	7	<u>:</u>	-	_	_
4) ADD 2) and 3) and carry forward to appropriate line of Summary	Page (last page only)	•	L	_	_	7	_	_	7	_	_		Ш

Payment This Period

0.00

Outstanding Balance at Close of This Period

6654.25

Amount Incurred This Period

0.00

NAME OF COMMITTEE (In Full)

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

Excluding Loans

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

PAGE 51 OF FOR LINE NUMBER (check only one)

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Mark	Greenberg	for	Congress

Mark Greenberg for Col	ngress	
A. Full Name (Last, First, Middle Initial) of Debtor Cooper Communications LLC	<u> </u>	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 3721.75		Transaction ID : D56D8FA16F7C34264A41
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	3721.75
B. Full Name (Last, First, Middle Initial) of Debtor (Ian Marshall's Golf Shop	or Creditor	Nature of Debt (Purpose): Outing Prize Vouchers DT sleeves and tee packs
Mailing Address 246 Guernseytown Road		
City State Watertown	Zip Code CT 06795-1819	
Outstanding Balance Beginning This Period 886.00 Amount Incurred This Period 0.00	Payment This Period 0.00	Transaction ID : D2D7416C09F2C4DC1992 Outstanding Balance at Close of This Period 886.00
C. Full Name (Last, First, Middle Initial) of Debtor Watertown Golf Club	or Creditor	Nature of Debt (Purpose): golf tournament expenses
Mailing Address 246 Guernseytown Road		-
City Watertown	State Zip Code CT 06795-1819	
Outstanding Balance Beginning This Period 6804.05	Payment This Period	Transaction ID : DB8C11DA6942C472A944 Outstanding Balance at Close of This Period
Amount Incurred This Period 0.00	0.00	6804.05
1) SUBTOTALS This Period This Page (optional)		11411.80
2) TOTALS This Period (last page this line number of	only) ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	
4) ADD 2) and 3) and carry forward to appropriate	ine of Summary Page (last page only)	

(Use separate schedule(s) for each

PAGE 52 OF FOR (che

LINE NUMBER:			
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62

Excluding Loans			numbered line)	 X 10
NAME OF COMMITTEE (In Full)				•
Mark Greenberg for Co	ngress			
A. Full Name (Last, First, Middle Initial) of Debtor Dey Smith Steele, LLC	or Creditor		Nature of De legal fees	ebt (Purpose):
Mailing Address 9 Depot Street Floor 2				
City State Milford	Zip Code CT	06460-3357		
Outstanding Balance Beginning This Period 14543.75			Transactio	on ID : DB6430B895C0F48A7A1D
Amount Incurred This Period	Paym	ent This Period	Outstandir	ng Balance at Close of This Period
0.00			0.00	14543.75
B. Full Name (Last, First, Middle Initial) of Debtor AT&T	or Creditor			ebt (Purpose): ernet service
Mailing Address PO Box 8110				
City State Aurora	Zip Code IL	60507-8110		
Outstanding Balance Beginning This Period 25.83			Transactio	on ID : D319CD540E132467190B
Amount Incurred This Period 0.00	Paym	ent This Period	Outstandir	ng Balance at Close of This Period 25.83
C. Full Name (Last, First, Middle Initial) of Debtor Watertown Main Street LLC	or Creditor		Nature of Do	ebt (Purpose): uarters
Mailing Address PO Box 28				
City Watertown	State CT	Zip Code 06795-0028		
Outstanding Balance Beginning This Period			Transacti	on ID : D366E903FA4464DD7A4D
1250.00				
Amount Incurred This Period	Paym	ent This Period		ng Balance at Close of This Period
0.00		, (0.00	1250.00
1) SUBTOTALS This Period This Page (optional)			>	15819.58
2) TOTALS This Period (last page this line number of	only)			

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

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

Excluding Loans

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

53 OF PAGE FOR LINE NUME (check only one)

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Co	ngres	S		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Theroux, Nowell & Stoughton, LLC				Nature of Debt (Purpose): accounting and software
Mailing Address 53 Peck Road				
City State	Zip Code	1		_
Torrington	СТ	06790-6106		
Outstanding Balance Beginning This Period 7280.50				Transaction ID : D6507C36E07BA4CDB916
Amount Incurred This Period	Pa	yment This Period		Outstanding Balance at Close of This Period
0.00	, ,		0.00	7280.50
B. Full Name (Last, First, Middle Initial) of Debtor William J Evans	or Creditor			Nature of Debt (Purpose): fence posts and cable ties
Mailing Address 325 Celia Drive				
City State Wolcott	Zip Code CT	06705-3153		
Outstanding Balance Beginning This Period				Transaction ID : DE352092E4CD24B50A3F
237.65				
Amount Incurred This Period	Pa	yment This Period		Outstanding Balance at Close of This Period
0.00		7	0.00	237.65
C. Full Name (Last, First, Middle Initial) of Debto William J Evans	r or Creditor			Nature of Debt (Purpose): postage, permanent markers, badges, cream for office
Mailing Address 325 Celia Drive				
City Wolcott	State CT	Zip Code 06705-3153		
Outstanding Balance Beginning This Period 550.55				Transaction ID : D596FE4B656C945F99EC
Amount Incurred This Period	Pa	yment This Period		Outstanding Balance at Close of This Period
0.00	,		0.00	550.55
SUBTOTALS This Period This Page (optional)			>	8068.70
TOTALS This Period (last page this line number	only)		>	
TOTAL OUTSTANDING LOANS from Schedule	C (last page of	only)	>	
ADD 2) and 3) and carry forward to appropriate	line of Sumn	nary 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

Mark Greenberg for Co.	ngress	
A. Full Name (Last, First, Middle Initial) of Debtor William J Evans	<u> </u>	Nature of Debt (Purpose): Parking, fuel for truck, meals, and lodging
Mailing Address 325 Celia Drive		
City State Wolcott	Zip Code CT 06705-3153	
Outstanding Balance Beginning This Period		Transaction ID : DFFC81E238F8B40769AA
2147.05		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2147.05
B. Full Name (Last, First, Middle Initial) of Debtor of Cooper Communications LLC	or Creditor	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		Transaction ID : D5851A390930444CA900
3721.75		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	3721.75
C. 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 Milford	State Zip Code CT 06460-3357	
Outstanding Balance Beginning This Period		Transaction ID : D2039E0041DC549E5B4F
1625.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1625.00
1) SUBTOTALS This Period This Page (optional)		7493.80
2) TOTALS This Period (last page this line number of	only)	
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	
4) ADD 2) and 3) and carry forward to appropriate I	ine of Summary Page (last page only)	·

Excluding Loans

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

PAGE 55 OF FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Co	ongress		
A. Full Name (Last, First, Middle Initial) of Debt American Copy Service Center,	or or Creditor		Nature of Debt (Purpose): copy service
Mailing Address 2095 S Main Street			
City State Waterbury	Zip Code CT	06706-2029	
Outstanding Balance Beginning This Period 192.78			Transaction ID: D935738160B1C483A8FC
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period
0.00		0.00	192.78
B. Full Name (Last, First, Middle Initial) of Debto Cooper Communications LLC	or or Creditor		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			Transaction ID : DF28B3AD16148440BBDB
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period
0.00	7	0.00	3721.75
C. Full Name (Last, First, Middle Initial) of Debt Watertown Main Street LLC	or or Creditor		Nature of Debt (Purpose): Office Rent
Mailing Address PO Box 28			
City Watertown	State CT	Zip Code 06795-0028	
Outstanding Balance Beginning This Period 1250.00			Transaction ID : DF2520AB50E9F4DBAB7E
Amount Incurred This Period 0.00	Payn	nent This Period 0.00	Outstanding Balance at Close of This Period 1250.00
SUBTOTALS This Period This Page (optional)			5164.53
TOTALS This Period (last page this line number	r only)		·
TOTAL OUTSTANDING LOANS from Schedule	C (last page onl	y)	•
ADD 2) and 3) and carry forward to appropriate	e line of Summar	y Page (last page only)	>

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(Use separate schedule(s) for each

PAGE 56 OF FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)				
Mark Greenberg for Co	ongress			
A. Full Name (Last, First, Middle Initial) of Debt	or or Creditor			ebt (Purpose):
William J Evans			General Co	nsultant
Mailing Address 325 Celia Drive				
City State	Zip Code			
Wolcott	СТ	06705-3153		
Outstanding Balance Beginning This Period			Transactio	on ID : D58DFD706FBE44A75B42
4500.00				
4300.00				
Amount Incurred This Period	Payr	nent This Period	Outstandir	g Balance at Close of This Period
0.00	,	4500.	00	0.00
B. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of De	ebt (Purpose):
VoterTrove, Inc.			Get Out Ou	
Mailing Address 921 Cavalry Ride Trail				
City State	Zip Code			
Austin	TX	78732-2370		
Outstanding Balance Beginning This Period			Transactio	on ID : D2E9CF38F7BB34BC8B2E
2484.26				
Amount Incurred This Period	Payr	nent This Period	Outstandir	ng Balance at Close of This Period
0.00		0.	00	2484.26
9 9	7	7		7
C. Full Name (Last, First, Middle Initial) of Debi	tor or Creditor			ebt (Purpose):
Jamestown Associates			broadcast	TV Advertising
Mailing Address 5 Mapleton Road				
Suite 300 City	State	Zip Code		
Princeton	NJ	08540-9646		
Outstanding Balance Beginning This Period		000 10 00 10	Transacti	on ID : D5108054CCF8F43D189A
1275.00				
Amount Incurred This Period	Payr	ment This Period	Outstandin	ng Balance at Close of This Period
0.00		0.	00	1275.00
1) SUBTOTALS This Period This Page (optional).			▶	3759.26
				, , , , , , , , , , , , , , , , , , , ,
2) TOTALS This Period (last page this line number	er only)			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page on	ly))	
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Excluding Loans

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

PAGE 57 OF FOR (chec

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62

NAME OF COMMITTEE (In Full)

Mark Greenberg for Cor	ngress	
A. Full Name (Last, First, Middle Initial) of Debtor Red Maverick Media, LLC	_ _	Nature of Debt (Purpose): direct mail advertising design fee
Mailing Address 403 N 2nd Street Suite 2		
City State Harrisburg	Zip Code PA 17101-1377	
Outstanding Balance Beginning This Period 200.00		Transaction ID : D91D6AEC9EBF945589B0
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00
B. Full Name (Last, First, Middle Initial) of Debtor of J. Kenneth Nowell	or Creditor	Nature of Debt (Purpose): event supplies, facility rental, catering, beverages
Mailing Address 53 Peck Road		
City State Torrington	Zip Code CT 06790-6106	
Outstanding Balance Beginning This Period 4442.90 Amount Incurred This Period 0.00	Payment This Period 4442.90	Transaction ID : DE5709B976B8C4E73A86 Outstanding Balance at Close of This Period 0.00
C. Full Name (Last, First, Middle Initial) of Debtor VoterTrove, Inc.	or Creditor	Nature of Debt (Purpose): Get Out Our Vote
Mailing Address 921 Cavalry Ride Trail		
City Austin	State Zip Code TX 78732-2370	
Outstanding Balance Beginning This Period 1242.96 Amount Incurred This Period	Payment This Period	Transaction ID: D98E2998CB2884E159A8 Outstanding Balance at Close of This Period
0.00	0.00	1242.96
1) SUBTOTALS This Period This Page (optional)	>	1442.96
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)	

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(Use separate schedule(s) for each

PAGE 58 OF FOR LINE NUMBER: (check only one)

Excluding Loans			numbered line)	X 10
NAME OF COMMITTEE (In Full)				
Mark Greenberg for Co	ngress			
A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor			ebt (Purpose):
Theroux, Nowell & Stoughton, LL	.C		accounting	services
Mailing Address 53 Peck Road				
City State	Zip Code			
Torrington	CT	06790-6106		
Outstanding Balance Beginning This Period			Transactio	on ID : D5C60BE2B34E644C09E8
10730.50				
Amount Incurred This Period	Paym	ent This Period	Outstandii	ng Balance at Close of This Period
0.00	,	0.	00	10730.50
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	ebt (Purpose):
KB Strategic Group	or ordator		fundraising	
Mailing Address PO Box 101682				
City State	Zip Code			
Arlington	VA	22210-4682		
Outstanding Balance Beginning This Period			Transaction	on ID : D7041AF0208204D16B00
1850.00				
	_			
Amount Incurred This Period	Paym	ent This Period	Outstandii	ng Balance at Close of This Period
0.00		1850.	00	0.00
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of D	ebt (Purpose):
Arrow Printers, Inc.			signs	· ' '
Mailing Address 311 Main Street				
City	State	Zip Code		
Ansonia	СТ	06401-2301		
Outstanding Balance Beginning This Period			Transact	ion ID : D82BF7F52877B4CA4B31
358.93				
330.33				
Amount Incurred This Period	Paym	ent This Period	Outstandii	ng Balance at Close of This Period
0.00		0.	.00	358.93
SUBTOTALS This Period This Page (optional)				11089.43
				7 1 7 1 1 1
2) TOTALS This Period (last page this line number				9
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only	')		7 7

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

Excluding Loans

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

PAGE 59 OF
FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)	
Mark Greenberg for Congress	c

Mark Greenberg for Co.	ngress	
A. Full Name (Last, First, Middle Initial) of Debtor American Copy Service Center, Ir	or Creditor	Nature of Debt (Purpose): copying
Mailing Address 2095 S Main Street		-
City State Waterbury	Zip Code CT 06706-2029	-
Outstanding Balance Beginning This Period		Transaction ID : DF071D108518A4693B3C
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	19.56
B. Full Name (Last, First, Middle Initial) of Debtor of Maeve McHugh	or Creditor	Nature of Debt (Purpose): Mileage reimbursement
Mailing Address PO Box 507		
City State Niantic	Zip Code CT 06357-0507	
Outstanding Balance Beginning This Period 78.85 Amount Incurred This Period 0.00	Payment This Period 78.85	Transaction ID: D769BE6E7D83747B59E2 Outstanding Balance at Close of This Period 0.00
C. Full Name (Last, First, Middle Initial) of Debtor William J Evans	or Creditor	Nature of Debt (Purpose): phone system, digital camera,postage water, half & half office
Mailing Address 325 Celia Drive		
City Wolcott	State Zip Code CT 06705-3153	
Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period	Payment This Period	Transaction ID: D9022F69B32BB4B16861 Outstanding Balance at Close of This Period
1050.51	0.00	1050.51
1) SUBTOTALS This Period This Page (optional)		1070.07
2) TOTALS This Period (last page this line number of	only)	
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	
4) ADD 2) and 3) and carry forward to appropriate I	ine of Summary Page (last page only)	

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 60 OF
FOR LINE NUMBER:
(check only one)

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NΑ	AME OF COMMITTEE (In Full)	
N	Mark Greenberg for Congress	
	A Full Name (Last First Middle Initial) of Dalston on Condition	

Mark Greenberg for Co	ngress	
A. Full Name (Last, First, Middle Initial) of Debtor William J Evans	or Creditor	Nature of Debt (Purpose): direct mail advertising
Mailing Address 325 Celia Drive		
City State	Zip Code	
Wolcott	CT 06705-3153	
Outstanding Balance Beginning This Period		Transaction ID: D21D7F27498D54B48A7C
0.00		
9 9 9		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2023.91	0.00	2023.91
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
William J Evans		Gas, meals and catering
Mailing Address 325 Celia Drive		
City State	Zip Code	
Wolcott	CT 06705-3153	
Outstanding Balance Beginning This Period 0.00		Transaction ID : DFE26D577CF2E40D49D4
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
509.84	0.00	509.84
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
William J Evans		sign materials
Mailing Address 325 Celia Drive		
City	State Zip Code	
Wolcott	CT 06705-3153	
Outstanding Balance Beginning This Period		Transaction ID : DADE3AA3705ED43D4955
0.00		
9 9		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
613.17	0.00	613.17
A) CURTOTALO TES DAS LETES DE LA COMP		3146.92
1) SUBTOTALS This Period This Page (optional)		7 7
2) TOTALS This Period (last page this line number	only)	
3) TOTAL OUTSTANDING LOANS from Schedule C	C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate	line of Summary 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 61 OF FOR LINE NUMBER: (check only one)

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Mark	Greenberg	for	Congress

Mark Greenberg for Cor	ngress	
A. 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
0.00 Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
213.85	0.00	213.85
B. Full Name (Last, First, Middle Initial) of Debtor of Frontier Communications	or Creditor	Nature of Debt (Purpose): internet
Mailing Address PO Box 20550		
City State Rochester	Zip Code NY 14602-0550	
Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 75.00	Payment This Period 0.00	Transaction ID: D43BB23335F9F46EA90B Outstanding Balance at Close of This Period 75.00
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
United States Treasury	or orealter	Federal Unemployment Tax 940 2014 Balance
Mailing Address PO Box 804521		
City Cincinnati	State Zip Code OH 45280-4521	
Outstanding Balance Beginning This Period 0.00		Transaction ID : DB5FF33EBBA3349C183E
Amount Incurred This Period 1116.58	Payment This Period 0.00	Outstanding Balance at Close of This Period 1116.58
1) SUBTOTALS This Period This Page (optional)		1405.43
2) TOTALS This Period (last page this line number o	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 62 OF
FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Co	ngress		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Admin. Of Unemployment Compensation Mailing Address PO Box 2940			Nature of Debt (Purpose): SUTA payroll tax Quarter 4 2014
Outstanding Balance Beginning This Period 0.00			Transaction ID : D59BEF277C1C64B2E8ED
Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period 1175.26
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Theroux, Nowell & Stoughton, LLC Mailing Address 53 Peck Road			Nature of Debt (Purpose): accounting services
City State Torrington	Zip Code CT	06790-6106	
Outstanding Balance Beginning This Period 0.00	-		Transaction ID : DB2977F1C21BB4D45991
Amount Incurred This Period 4487.50	Paym	ent This Period	Outstanding Balance at Close of This Period 4487.50
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	Paym	ent This Period	Outstanding Balance at Close of This Period
, ,		9 1 1 4	
) SUBTOTALS This Period This Page (optional)			5662.76
) TOTALS This Period (last page this line number only)			95667.31
TOTAL OUTSTANDING LOANS from Schedule C (last page only)			1811500.00
) ADD 2) and 3) and carry forward to appropriate	1907167.31		