| FFC I | REPORT OF AND DISBUR For An Authorized | SEMENTS | Office | Use Only |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------|
| 1. NAME OF COMMITTEE (in full) | TYPE OR PRINT ▼ | Example: If typing, type over the lines. | 12FE4M5 | |
| Friends of Nan Haywo | rth | | | |
| | | | | |
| ADDRESS (number and street) | P.O. Box 394 | | | |
| Check if different than previously reported. (ACC) | Fishkill | | NY 12524 | · · · · · · · · · · · · · · · · · · · |
| 2. FEC IDENTIFICATION N | JMBER VC | | STATE | ZIP CODE ▲ STATE ▼ DISTRICT |
| C C00466490 | 3. IS 1 REF | PORT × NEW (N) OR | AMENDED (A) | |
| 4. TYPE OF REPORT (Ch (a) Quarterly Reports: April 15 Quarterly F July 15 Quarterly F October 15 Quarter January 31 Year-Er Termination Report | (b) 12-D Report (Q1) Heport (Q2) Hy Report (Q3) Election (C) 30-D (TER) | Primary (12P) Convention (12C) Convention (12C) Convention (12C) Pay POST -Election Report for the General (30G) Convention (12C) | General (12G) Special (12S) | Runoff (12R) in the State of Special (30S) in the State of |
| 5. Covering Period | M / D D / Y Y Y 01 2013 | Y through 03 | | Y Y Y 2013 |
| I certify that I have examined the Type or Print Name of Treasure | | of my knowledge and belief it is | true, correct and com | pplete. |
| Signature of Treasurer | n Jahns | [Electronically Filed] | Date 04 / | 15 / Y Y Y Y 2013 |
| Office | eous, or incomplete informati | on may subject the person signing | | |
| Use Only | | | | EC FORM 3 Revised 02/2003) |

04/14/2013 14 : 37

PAGE 1 / 33

| Ima | age# 13961603186 | | |
|-----|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| | FEC Form 3 (Revised 02/2003) | SUMMARY PAGE of Receipts and Disbursements | PAGE 2 / 33 |
| | Write or Type Committee Name Friends of Nan Hayworth | | |
| R | Report Covering the Period: From: | M m / D m / Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m Y m | M M / D D / Y Y Y Y 31 / 2013 |
| | | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
| 6. | Net Contributions (other than loans) | | |
| | (a) Total Contributions (other than loans) (from Line 11(e)) | 8496.00 | 17014.43 |
| | (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 5100.00 |
| | (c) Net Contributions (other than loans (subtract Line 6(b) from Line 6(a)). | 8496.00 | 11914.43 |
| 7. | Net Operating Expenditures | | |
| | (a) Total Operating Expenditures (from Line 17) | 60891.79 | 171353.82 |
| | (b) Total Offsets to Operating Expenditures (from Line 14) | 5184.98 | 5184.98 |
| | (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 55706.81 | 166168.84 |
| 8. | Cash on Hand at Close of Reporting Period (from Line 27) | 7460.83 | |
| 9. | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 654517.55 | |

For further information contact:

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

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

| Γ | - DE | TAILED SUMMARY PAGE | |
|-----|------------------------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | FEC Form 3 (Revised 12/2003) | of Receipts | PAGE 3 / 33 |
| | rite or Type Committee Name | | |
| F | riends of Nan Hayworth | | |
| Re | eport Covering the Period: From: | / D D / Y Y Y Y 01 / 2013 To: | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
| 11. | CONTRIBUTIONS (other than loans) FROM: | | |
| | (a) Individuals/Persons Other Than | | |
| | Political Committees (i) Itemized (use Schedule A) | 0.00 | 7500.00 |
| | | 0.00 | 0.00 |
| | (ii) Unitemized (iii) TOTAL of contributions | 7 7 7 | 1 1 1 |
| | from individuals | 0.00 | 7500.00 |
| | (b) Political Party Committees | 0.00 | , 0.00 |
| | (c) Other Political Committees (such as PACs) | 8496.00 | 9514.43 |
| | (d) The Candidate | 0.00 | 0.00 |
| | (e) TOTAL CONTRIBUTIONS | 7 7 7 | |
| | (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) | 8496.00 | 17014.43 |
| 12. | TRANSFERS FROM OTHER | | |
| | AUTHORIZED COMMITTEES | 148.81 | 148.81 |
| 13. | LOANS: | | |
| | (a) Made or Guaranteed by the Candidate | 0.00 | 73533.45 |
| | (b) All Other Loans | 0.00 | 0.00 |
| | (c) TOTAL LOANS | | · · · · · · · · · · · |
| | (add Lines 13(a) and (b)) | 0.00 | 73533.45 |
| 14. | OFFSETS TO OPERATING | | |
| | EXPENDITURES (Refunds, Rebates, etc.) | 5184.98 | 5184.98 |
| 15. | OTHER RECEIPTS | | |
| | (Dividends, Interest, etc.) | 1.20 | 13.82 |
| 16. | TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) | 13830.99 | 95895.49 |

FEC Form 3 (Revised 02/2003) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 60891.79 171353.82 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 63500.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 63500.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 5100.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 5100.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 60891.79 239953.82 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY**

| 23. | CASH ON HAND AT BEGINNING OF REPORTING PERIOD | | 7 | _ | 7 | - | 54521.63 |
|-----|------------------------------------------------------------------------------|--|---|---|---|---|----------|
| 24 | TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) | | 7 | _ | 5 | - | 13830.99 |
| 25. | SUBTOTAL (add Line 23 and Line 24) | | , | | 5 | - | 68352.62 |
| 26. | TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) | | 7 | | , | | 60891.79 |
| 27. | CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) | | 7 | | 9 | - | 7460.83 |

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4 / 33

| S | SCHEDULE A (FEC Form 3) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 5 OF 33 (check only one) | | | | |
|------------|------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------------------|---------------------------------------------------------|--|--|--|--|
| IT | EMIZED RECEIPTS | | for each category of the Detailed Summary Page | $ \begin{array}{ c c c c c c c c c c c c c c c c c c c$ | | | | |
| Ar or | ny information copied from such Reports and S for commercial purposes, other than using the | tatements m name and | nay not be sold or used by any p address of any political committe | person for the purpose of soliciting contributions | | | | |
| | NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | | | | |
| <u>А</u> . | Full Name (Last, First, Middle Initial) FRESHMAN HOLD'EM JFC | | | Date of Receipt | | | | |
| | Mailing Address P.O. BOX 75021 | | | 03 31 2013 | | | | |
| | City WASHINGTON | State DC | Zip Code 20013-0021 | Transaction ID : SA11.8002 | | | | |
| | FEC ID number of contributing federal political committee. | | 0523985 | Amount of Each Receipt this Period | | | | |
| | Name of Employer | Occupation | 1 | CONTRIBUTION | | | | |
| | Receipt For: 2012 Primary X General Other (specify) | Election C | ycle-to-Date 7071.28 | IN-KIND EVENT SPACE | | | | |
| — B. | Full Name (Last, First, Middle Initial) FRESHMAN HOLD'EM JFC | | | Date of Receipt | | | | |
| υ. | Mailing Address P.O. BOX 75021 | | | M M / D D / Y Y Y Y 03 31 2013 | | | | |
| | City WASHINGTON | State DC | Zip Code 20013-0021 | Transaction ID : SA11.8007 | | | | |
| | FEC ID number of contributing federal political committee. | - | 0523985 | Amount of Each Receipt this Period | | | | |
| | Name of Employer | Occupation | ו | CONTRIBUTION | | | | |
| | Receipt For: 2012 Primary X General Other (specify) | Election C | ycle-to-Date 7071.28 | IN-KIND EVENT SPACE | | | | |
| | Full Name (Last, First, Middle Initial) FRESHMAN HOLD'EM JFC | | | Date of Receipt | | | | |
| C. | Mailing Address P.O. BOX 75021 | | | 03 / 0 / Y Y Y Y 03 31 2013 | | | | |
| | City WASHINGTON | State DC | Zip Code 20013-0021 | Transaction ID : SA11.8008 | | | | |
| | FEC ID number of contributing federal political committee. | Ссо | 0523985 | Amount of Each Receipt this Period | | | | |
| | Name of Employer | Occupation | 1 | 5.31 CONTRIBUTION | | | | |
| | Receipt For: 2012 Primary X General Other (specify) | Election C | ycle-to-Date 7071.28 | IN-KIND EVENT SPACE | | | | |
| s | UBTOTAL of Receipts This Page (optional) | 127.58 | | | | | | |
| Г | OTAL This Period (last page this line number o | only) | | , , | | | | |

| | Use separate schedu for each category of Detailed Summary Pa | the 11a 11b X 11c 11d |
|---------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|
| | | |
| | | 12 13a 13b 14 15 |
| or for commercial purposes, other than using the | | by any person for the purpose of soliciting contributions committee to solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | |
| Full Name (Last, First, Middle Initial) PATRIOT DAY IV | Date of Receipt | |
| Mailing Address 228 S. WASHINGTON ST., S | M M / D D / Y Y Y Y 03 31 2013 | |
| City ALEXANDRIA | State Zip Code VA 22314-5404 | Transaction ID : SA11.7998 |
| FEC ID number of contributing federal political committee. | C C00519744 | Amount of Each Receipt this Period |
| Name of Employer | Occupation | 868.42 CONTRIBUTION |
| Receipt For: 2012 | Election Cycle-to-Date | |
| Primary X General Other (specify) | 756 | 9.38 FINAL ALLOCATION - ALL DONORS PREVIOU |
| Full Name (Last, First, Middle Initial) HUDSON VALLEY FUTURE FUN | D | Date of Receipt |
| Mailing Address 1006 PENDLETON STREET | M M / D D / Y Y Y Y 02 25 2013 | |
| City ALEXANDRIA | State Zip Code VA 22314-1837 | Transaction ID : SA11.7995 |
| FEC ID number of contributing federal political committee. | C C00512541 | Amount of Each Receipt this Period |
| Name of Employer | Occupation | 2500.00 CONTRIBUTION |
| Receipt For: 2012 | Election Cycle-to-Date | |
| Primary X General Other (specify) | | 0.00 |
| Full Name (Last, First, Middle Initial) HUDSON VALLEY FUTURE FU | ND | Date of Receipt |
| Mailing Address 1006 PENDLETON STREET | | 02 25 2013 |
| City ALEXANDRIA | State Zip Code VA 22314-1837 | Transaction ID : SA11.7996 |
| FEC ID number of contributing federal political committee. | C C00512541 | Amount of Each Receipt this Period |
| Name of Employer | Occupation | 2500.00 CONTRIBUTION |
| Receipt For: 2010 | Election Cycle-to-Date | |
| Primary General Other (specify) | 500 | 00.00 |
| SUBTOTAL of Receipts This Page (optional) | | 5868.42 |
| TOTAL This Period (last page this line number | only) | |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7 OF 33 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15 | | | |
|----------------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| | | | | person for the purpose of soliciting contributions ee to solicit contributions from such committee. | | | |
| | NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) HUDSON VALLEY FUTURE FUND Mailing Address 1006 PENDLETON STREET | Date of Receipt | | | | | |
| | | 01-11- | 7. 0.1 | 02 25 2013 | | | |
| | City ALEXANDRIA | State VA | Zip Code 22314-1837 | Transaction ID : SA11.7997 | | | |
| | FEC ID number of contributing federal political committee. | C CO | 0512541 | Amount of Each Receipt this Period | | | |
| | Name of Employer | Occupatior | 1 | CONTRIBUTION | | | |
| | Receipt For: 2010 | Election C | ycle-to-Date | — | | | |
| | Primary X General Other (specify) | | 5000.00 |] | | | |
| — | Full Name (Last, First, Middle Initial) | | | Date of Receipt | | | |
| D. | Mailing Address | | | | | | |
| | City | State | Zip Code | | | | |
| | FEC ID number of contributing federal political committee. | | | Amount of Each Receipt this Period | | | |
| | Name of Employer | Occupatior | 1 | | | | |
| | Receipt For: | Election C | ycle-to-Date | | | | |
| | Primary General | _ | | 1 | | | |
| | Other (specify) | | y y | 1 | | | |
| _ | Full Name (Last, First, Middle Initial) | | | Date of Receipt | | | |
| C. | Mailing Address | | | | | | |
| | City | State | Zip Code | | | | |
| | FEC ID number of contributing federal political committee. | С | | Amount of Each Receipt this Period | | | |
| | Name of Employer | Occupation | 1 | | | | |
| | Receipt For: Primary General Other (specify) | Election C | ycle-to-Date |] | | | |
| 5 | UBTOTAL of Receipts This Page (optional) | | | 2500.00 | | | |
| | OTAL This David fact many this line and | | | 8496.00 | | | |
| 1 | OTAL This Period (last page this line number of | | | | | | |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | | | Use separate schedule(s) for each category of the | FOR LINE NUMBER: PAGE 8 OF 33 (check only one) 11a 11b 11c 11d | | | | | |
|----------------------------------------------|------------------------------------------------------------------------|----------------------------|------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| Δr | w information copied from such Reports and S | Statements m | Detailed Summary Page | X 12 13a 13b 14 15 person for the purpose of soliciting contributions | | | | | |
| | | | | ee to solicit contributions from such committee. | | | | | |
| | NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) FRESHMAN HOLD'EM JFC | Date of Receipt | | | | | | | |
| | Mailing Address P.O. BOX 75021 | 03 31 2013 | | | | | | | |
| | City | Transaction ID : SA12.7999 | | | | | | | |
| | WASHINGTON | DC | 20013-0021 | | | | | | |
| | FEC ID number of contributing federal political committee. | C co | 0523985 | Amount of Each Receipt this Period | | | | | |
| | Name of Employer | Occupation | 1 | CONTRIBUTION | | | | | |
| | Receipt For: 2012 | Election C | ycle-to-Date | | | | | | |
| | Primary X General Other (specify) | | 7071.28 | SEE ATTRIBUTION BELOW | | | | | |
| — | Full Name (Last, First, Middle Initial) CITIGROUP, INC. PAC-FEDERAI | _ | | Date of Receipt | | | | | |
| в. | Mailing Address 1101 PENNSYLVANIA AVEN | 03 31 2013 | | | | | | | |
| | City WASHINGTON | State DC | Zip Code 20004-2524 | Transaction ID : SA12.8000 | | | | | |
| | FEC ID number of contributing federal political committee. | C CO | 0008474 | Amount of Each Receipt this Period | | | | | |
| | Name of Employer | Occupation | 1 | LINE TO THE CONTRIBUTION | | | | | |
| | Receipt For: 2012 | Election C | ycle-to-Date | | | | | | |
| | Primary X General Other (specify) | | 5603.85 | JFC-> FRESHMAN HOLD'EM JFC | | | | | |
| — c. | Full Name (Last, First, Middle Initial) PRICE FOR CONGRESS | | | Date of Receipt | | | | | |
| | Mailing Address P.O. BOX 425 | | | 03 31 2013 | | | | | |
| | City | State | Zip Code | Transaction ID : SA12.8001 | | | | | |
| | ROSWELL | GA | 30077-0425 | | | | | | |
| | FEC ID number of contributing federal political committee. | C co | 0386755 | Amount of Each Receipt this Period | | | | | |
| | Name of Employer Occ | | 1 | 3.28 CONTRIBUTION | | | | | |
| | Receipt For: 2012 | Election C | ycle-to-Date | [MEMO ITEM] | | | | | |
| | Other (specify) | | 944.06 | JFC-> FRESHMAN HOLD'EM JFC | | | | | |
| s | UBTOTAL of Receipts This Page (optional) | 107.13 | | | | | | | |
| т | OTAL This Period (last page this line number | | | | | | | | |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | | Statements m | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:PAGE9OF33(check only one)11a11b11c11d $11a$ 11b11c11d15 12 13a13b1415 | | | | |
|----------------------------------------------|-----------------------------------------------------------------------------------------------------------|-------------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|--|--|--|--|
| | | | | ee to solicit contributions from such committee. | | | | |
| A . | A. Full Name (Last, First, Middle Initial) FRESHMAN HOLD'EM JFC Mailing Address P.O. BOX 75021 | | | Date of Receipt | | | | |
| | City WASHINGTON | State DC | Zip Code 20013-0021 | Transaction ID : SA12.8003 | | | | |
| | FEC ID number of contributing federal political committee. | C co | 0523985 | Amount of Each Receipt this Period | | | | |
| | Name of Employer | Occupation | 1 | CONTRIBUTION | | | | |
| | Receipt For: 2012 Primary X General Other (specify) | SEE ATTRIBUTION BELOW | | | | | | |
| в. | Full Name (Last, First, Middle Initial) AMERICAN HEALTH CARE ASSO Mailing Address 1201 L STREET, NW | OCIATIO | N PAC | Date of Receipt | | | | |
| | City WASHINGTON | State DC | Zip Code 20005-4024 | Transaction ID : SA12.8005 | | | | |
| | FEC ID number of contributing federal political committee. | C co | 0006080 | Amount of Each Receipt this Period | | | | |
| | Name of Employer | Occupation | 1 | CONTRIBUTION | | | | |
| | Receipt For: 2012 Primary X General Other (specify) | [MEMO ITEM] JFC-> FRESHMAN HOLD'EM JFC | | | | | | |
| — с. | Full Name (Last, First, Middle Initial) GARDNER FOR CONGRESS 2 | 012 | | Date of Receipt | | | | |
| 0. | Mailing Address 9227 E. LINCOLN AVE., # 200 | | 7. 0.1 | 03 / D D / Y Y Y Y 03 31 2013 | | | | |
| | City LONE TREE | State CO | Zip Code 80124-5506 | Transaction ID : SA12.8006 | | | | |
| | FEC ID number of contributing federal political committee. | C co | 0492454 | Amount of Each Receipt this Period | | | | |
| | Name of Employer | | 1 | CONTRIBUTION | | | | |
| | Receipt For: 2012 Primary X General Other (specify) | Election C | ycle-to-Date 900.00 | [MEMO ITEM] JFC-> FRESHMAN HOLD'EM JFC | | | | |
| 5 | UBTOTAL of Receipts This Page (optional) | | 41.68 | | | | | |
| 1 | OTAL This Period (last page this line number of | only) | | , | | | | |

| SCHEDULE A (FEC Form 3) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 10 OF 33 (check only one) | | | | | |
|-------------------------|------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| IT | EMIZED RECEIPTS | | for each category of the Detailed Summary Page | 11a 11b 11c 11d | | | | | |
| _ | | | | X 12 13a 13b 14 15 | | | | | |
| Ar or | ny information copied from such Reports and S for commercial purposes, other than using the | statements me and | nay not be sold or used by any address of any political committe | person for the purpose of soliciting contributions be to solicit contributions from such committee. | | | | | |
| | NAME OF COMMITTEE (In Full) | | | | | | | | |
| ۲ ۸. | Full Name (Last, First, Middle Initial) PRICE FOR CONGRESS | | | Date of Receipt | | | | | |
| А. | Mailing Address P.O. BOX 425 | | | 03 31 2013 | | | | | |
| | City ROSWELL | State GA | Zip Code 30077-0425 | Transaction ID : SA12.8004 | | | | | |
| | FEC ID number of contributing federal political committee. | C CO | 0386755 | Amount of Each Receipt this Period | | | | | |
| | Name of Employer | Occupation | 1 | CONTRIBUTION | | | | | |
| | Receipt For: 2012 | Election C | ycle-to-Date | [MEMO ITEM] | | | | | |
| | Primary X General | | | JFC-> FRESHMAN HOLD'EM JFC | | | | | |
| | Other (specify) | L | 944.06 | | | | | | |
| в. | Full Name (Last, First, Middle Initial) | | | Date of Receipt | | | | | |
| 0. | Mailing Address | M M / D D / Y Y Y Y | | | | | | | |
| | City | | | | | | | | |
| | FEC ID number of contributing federal political committee. | Amount of Each Receipt this Period | | | | | | | |
| | Name of Employer | Occupation | 1 | | | | | | |
| | Receipt For: | Election C | ycle-to-Date | | | | | | |
| | Primary General | | | 1 | | | | | |
| | Other (specify) | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | Date of Receipt | | | | | |
| C. | Mailing Address | | | | | | | | |
| | City | State | Zip Code | | | | | | |
| | FEC ID number of contributing federal political committee. | С | | Amount of Each Receipt this Period | | | | | |
| | Primary General | | 1 | | | | | | |
| | | | ycle-to-Date | - | | | | | |
| | | | | 1 | | | | | |
| Other (specify) | | | y | | | | | | |
| | SUBTOTAL of Receipts This Page (optional) | 0.00 | | | | | | | |
| F | | | | | | | | | |
| ר | OTAL This Period (last page this line number of | | 148.81 | | | | | | |

| S | SCHEDULE A (FEC Form 3) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 11 OF 33 (check only one) | | | | | | | |
|------------|----------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------------|----------------------------------------------------|----------------------|--|--|--|--|--|--|
| | | | for each category of the Detailed Summary Page | | | | | | | | |
| IT | EMIZED RECEIPTS | | | 11a 11b 11c 11c | k | | | | | | |
| | | | Detailed Summary Fage | 12 13a 13b 🗙 14 | 15 | | | | | | |
| A | ny information copied from such Reports and r for commercial purposes, other than using t | Statements n | nay not be sold or used by any address of any political committ | erson for the purpose of soliciting cont | ributions mittee. | | | | | | |
| F | | | | | | | | | | | |
| | NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | | | | | | | |
| <u>А</u> . | Full Name (Last, First, Middle Initial) JAMESTOWN ASSOCIATES | | | | | | | | | | |
| А. | Mailing Address 5 MAPLETON ROAD, SUIT | Date of Receipt 02 25 2013 | Y | | | | | | | | |
| | City | State | Zip Code | | | | | | | | |
| | PRINCETON | NJ | 08540 | Transaction ID : SA14.1801 | | | | | | | |
| | FEC ID number of contributing federal political committee. | С | | Amount of Each Receipt this Peric | bd | | | | | | |
| | Name of Employer | Occupatio | n | OVERPAYMENT REFUND | 34.98 | | | | | | |
| | Receipt For: 2012 | Flection C | cycle-to-Date | - | | | | | | | |
| | Primary X General | Election | | OVERPAYMENT REFUND | | | | | | | |
| | Other (specify) | OVER ATMENT REFORD | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | Date of Receipt | | | | | | | |
| B. | Mailing Address | M M / D D / Y Y Y Y Y | | | | | | | | | |
| | City | | | | | | | | | | |
| | FEC ID number of contributing federal political committee. | С | | Amount of Each Receipt this Peric | bd | | | | | | |
| | Name of Employer | Occupatio | n | - L, | | | | | | | |
| | Receipt For: | Election (| cycle-to-Date | _ | | | | | | | |
| | Primary General | Election | | | | | | | | | |
| | Other (specify) | | <u> </u> | | | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | 1 | | Date of Receipt | | | | | | | |
| C. | Mailing Address | | | | | | | | | | |
| | Maining Address | | | M M / D D / Y Y Y | Y | | | | | | |
| | City | State | Zip Code | | - | | | | | | |
| | FEC ID number of contributing | С | | Amount of Each Receipt this Perio | bd | | | | | | |
| | federal political committee. | U | | | | | | | | | |
| | Name of Employer | Occupatio | n | | | | | | | | |
| | Receipt For: | Election C | cycle-to-Date | | | | | | | | |
| | Primary General | | | | | | | | | | |
| _ | Other (specify) | | , , | | | | | | | | |
| Γ | SUPTOTAL of Possints This Dags (aptions) | | | 518 | 4.98 | | | | | | |
| F | SUBTOTAL of Receipts This Page (optional) | | | | 4.08 | | | | | | |
| 1 | TOTAL This Period (last page this line numbe | 518 | 4.98 | | | | | | | | |

| I Т | CHEDULE A (FEC Form 3) EMIZED RECEIPTS | Statements m | Use separate schedule(s) for each category of the Detailed Summary Page hay not be sold or used by any | FOR LINE NUMBER: PAGE 12 OF 33 (check only one) 11a 11b 11c 11d 11a 11b 11c 11d 11d 12 13a 13b 14 X 15 person for the purpose of soliciting contributions |
|------------|--------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| or | for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | e name and a | address of any political committe | e to solicit contributions from such committee. |
| A . | Full Name (Last, First, Middle Initial) WELLS FARGO Mailing Address 41 S. MOGER AVENUE | | | Date of Receipt |
| | City MOUNT KISCO | State NY | Zip Code 10549 | 01 31 2013 Transaction ID : SA15.1788 |
| | FEC ID number of contributing federal political committee. | | | Amount of Each Receipt this Period |
| | Name of Employer | Occupatior | 1 | INTEREST |
| | Receipt For: 2012 Primary X General Other (specify) | Election C | ycle-to-Date 1766.50 | INTEREST |
| В. | Full Name (Last, First, Middle Initial) WELLS FARGO Mailing Address 41 S. MOGER AVENUE | | | Date of Receipt |
| | | 02 28 2013 | | |
| | City MOUNT KISCO | State NY | Zip Code 10549 | Transaction ID : SA15.1794 |
| | FEC ID number of contributing federal political committee. | С | | Amount of Each Receipt this Period |
| | Name of Employer | Occupatior | 1 | 0.42 |
| | Receipt For: 2012 Primary X General Other (specify) | Election C | ycle-to-Date 1766.50 | INTEREST |
| _ | Full Name (Last, First, Middle Initial) WELLS FARGO | | | Date of Receipt |
| C. | Mailing Address 41 S. MOGER AVENUE | | | 03 29 2013 |
| | City MOUNT KISCO | State NY | Zip Code 10549 | Transaction ID : SA15.1797 |
| | FEC ID number of contributing federal political committee. | С | | Amount of Each Receipt this Period |
| | Name of Employer Occ | | 1 | 0.28 INTEREST |
| | Receipt For: 2012 Primary General Other (specify) | Election C | ycle-to-Date 1766.50 | INTEREST |
| s | UBTOTAL of Receipts This Page (optional) | 1.20 | | |
| T | OTAL This Period (last page this line number | only) | | 1.20 |

| SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS | | Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: PAGE 13 OF 33 (check only one) Image: Comparison of the second se | |
|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| | ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | |
| A. | Full Name (Last, First, Middle Initial) FRESHMAN HOLD'EM JFC Mailing Address P.O. BOX 75021 | | | Date of Disbursement | |
| | City State WASHINGTON DC | Zip Code 20013-0021 | | Amount of Each Disbursement this Period | |
| | Purpose of Disbursement IN-KIND CONTRIBUTION | | | 109.15 Transaction ID : SB17.8002 | |
| | Office Sought: House Disbursement For Senate Primary President Other (s | X General | Category/ Type | IN-KIND EVENT SPACE | |
| в. | State: District: 00 Full Name (Last, First, Middle Initial) FRESHMAN HOLD'EM JFC | | | Date of Disbursement | |
| | Mailing Address P.O. BOX 75021 | Zip Code | | 03 / D D / Y Y Y Y 03 31 2013 | |
| | WASHINGTON DC Purpose of Disbursement IN-KIND CONTRIBUTION DC | 20013-0021 | _ · · · | Amount of Each Disbursement this Period | |
| | Candidate Name | | Category/ Type | | |
| | Office Sought: House Disbursement For Senate President Other (s State: District: 00 | X General | | IN-KIND EVENT SPACE | |
| C. | Full Name (Last, First, Middle Initial) FRESHMAN HOLD'EM JFC Mailing Address P.O. BOX 75021 | | | Date of Disbursement | |
| | CityStateZiWASHINGTONDC2 | p Code 0013-0021 | | Amount of Each Disbursement this Period | |
| | Purpose of Disbursement IN-KIND CONTRIBUTION Candidate Name | | Category/ Type | 5.31 Transaction ID : SB17.8008 | |
| | Office Sought: House Disbursement For Senate President Other (state: | K General | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | IN-KIND EVENT SPACE | |
| s | UBTOTAL of Disbursements This Page (optional) | | | 127.58 | |
| | OTAL This Period (last page this line number only) | | | | |

| SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS | | Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: PAGE 14 OF 33 (check only one) X 17 18 19a 19b 20a 20b 20c 21 | | |
|----------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|--|
| | ny information copied from such Reports and Statem for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | | |
| Α. | Full Name (Last, First, Middle Initial) PAULA COLARUSSO Mailing Address 1544 STATE ROUTE 203 | | Date of Disbursement | | | |
| | City St CHATHAM N ¹ Purpose of Disbursement MILEAGE REIMBURSEMENT | Zip Code 12037 | | Amount of Each Disbursement this Period | | |
| | Candidate Name Office Sought: House Disburseme Senate F | rimary | X General | Category/ Type | MILEAGE REIMBURSEMENT | |
| В. | State: District: 00 Full Name (Last, First, Middle Initial) GUY T. PARISI Mailing Address 720 MILTON ROAD, #J1 |)ther (sj | респу) | | Date of Disbursement | |
| | City St | ate IY | Zip Code 10580 | Category/ | 03 11 2013 Amount of Each Disbursement this Period 7880.00 Transaction ID : SB17.I1781 | |
| | | ent For: Primary Other (sj | X General | Туре | LEGAL SERVICES | |
| Full Name (Last, First, Middle Initial) C. ATLASSTAR Mailing Address 453 ROUTE 9, PO BOX 436 | | | | | Date of Disbursement | |
| | City State FISHKILL NY Purpose of Disbursement PRINTING / PHOTOCOPYING Candidate Name Candidate Name | p Code 2524 Category/ | | Amount of Each Disbursement this Period 269.79 Transaction ID : SB17.I1792 | | |
| | | ent For: Primary Other (sj | X General | Туре | PRINTING / PHOTOCOPYING | |
| | UBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only) | | | | 10124.79 | |

| SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS | | Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: PAGE 15 OF 33 (check only one) X 17 18 19a 19b 20a 20b 20c 21 | |
|---------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| | y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | |
| A. | Full Name (Last, First, Middle Initial) BSB SOLUTIONS | Date of Disbursement | | | |
| | Mailing Address 3538 SOUTH WAKEFIELD ST. | | | 03 11 2013 | |
| | City State ARLINGTON VA | Zip Code 22206 | | Amount of Each Disbursement this Period | |
| | Purpose of Disbursement COMPLIANCE SERVICES | | | Transaction ID : SB17.I1779 | |
| | Candidate Name | | Category/ Type | | |
| | Office Sought: House Disbursement For Senate President Other (s | X General | | COMPLIANCE SERVICES | |
| в. | State: District: 00 Full Name (Last, First, Middle Initial) BSB SOLUTIONS | | | Date of Disbursement | |
| | Mailing Address 3538 SOUTH WAKEFIELD ST. | | | 02 14 Y Y Y Y 02 14 2013 | |
| | City State ARLINGTON VA | Zip Code 22206 | | Amount of Each Disbursement this Period | |
| | Purpose of Disbursement COMPLIANCE SERVICES | 22200 | | 6000.00 | |
| | Candidate Name | | Category/ Type | | |
| | Office Sought: House Disbursement For Senate President Other (s State: District: 00 | X General | | COMPLIANCE SERVICES | |
| c. | Full Name (Last, First, Middle Initial) | | | Date of Disbursement | |
| | Mailing Address 5055 SEMINARY ROAD, #612 | | | M M / D D / Y Y Y Y 01 04 2013 | |
| | | p Code 2311 | | Amount of Each Disbursement this Period | |
| | Purpose of Disbursement COMPLIANCE SOFTWARE | | | 800.00 | |
| | Candidate Name | | Category/ Type | Transaction ID : SB17.I1752 | |
| | Office Sought: House Disbursement For Senate President Other (s State: District: 00 | K General | | COMPLIANCE SOFTWARE | |
| s | UBTOTAL of Disbursements This Page (optional) | | | 8800.00 | |
| | OTAL This Period (last page this line number only) | | | | |

| SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS | | Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) PAGE 16 OF 33 X 17 18 19a 19b 20a 20b 20c 21 | | |
|---------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | | |
| A. | Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | |
| | Mailing Address 5055 SEMINARY ROAD, #612 | | | 02 25 2013 | | |
| | City State ALEXANDRIA VA | Zip Code 22311 | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement CAMPAIGN SOFTWARE | | · · · · | 1600.00 Transaction ID : SB17.11789 | | |
| | Candidate Name | | Category/ Type | | | |
| | Office Sought: House Disbursement For Senate Primary President Other (s | X General | | CAMPAIGN SOFTWARE | | |
| в. | State: District: 00 Full Name (Last, First, Middle Initial) CREATIVE DIRECT LLC | | | Date of Disbursement | | |
| | Mailing Address THE REAGAN BLDG, 25 E. MAIN ST. | | | 01 / D D / Y Y Y Y 01 09 2013 | | |
| | City State RICHMOND VA | Zip Code 23219 | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement GRAPHIC DESIGN | | | 28630.00 | | |
| | Candidate Name | | Category/ Type | Transaction ID : SB17.I1765 | | |
| | Office Sought: House Disbursement For Senate President Other (s State: District: 00 | K General | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | GRAPHIC DESIGN | | |
| C. | Full Name (Last, First, Middle Initial) NEW YORK STATE INSURANCE FUNE |) | | Date of Disbursement | | |
| | Mailing Address 105 CORPORATE PARK DRIVE, #200 | | | | | |
| | | p Code 0604 | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement DISABILITY INSURANCE Candidate Name | Category/ | | 60.00 Transaction ID : SB17.I1784 | | |
| | Office Sought: House Disbursement For Senate President Other (s State: District: 00 | X General | Туре | DISABILITY INSURANCE | | |
| s | UBTOTAL of Disbursements This Page (optional) | | | 30290.00 | | |
| т | OTAL This Period (last page this line number only) | | | · · · · · · · · · · · · · · · · · · · | | |

| SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS | | Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) PAGE 17 OF 33 X 17 18 19a 19b 20a 20b 20c 21 | | |
|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | | |
| Α. | Full Name (Last, First, Middle Initial) PATCH Mailing Address 4 CHASE METROTECH CENTER, 7TH FL | | Date of Disbursement | | | |
| | City State BROOKLYN NY Purpose of Disbursement V | Zip Code 11245 | | Amount of Each Disbursement this Period | | |
| | VIDEO DISTRIBUTION Candidate Name | | Category/ Type | Transaction ID : SB17.I1790 | | |
| | Office Sought: House Disbursement For Senate Primary President Other (s State: District: 00 | X General | | VIDEO DISTRIBUTION | | |
| в. | Full Name (Last, First, Middle Initial) PAYCHEX, INC. Mailing Address 911 PANORAMA TRAIL, S. | | | Date of Disbursement | | |
| | City State ROCHESTER NY Purpose of Disbursement PAYROLL EXPENSE Candidate Name Candidate Name | Zip Code 14625 | Category/ | Amount of Each Disbursement this Period 44.00 Transaction ID : SB17.I1775 | | |
| | Office Sought: House Disbursement For Senate President Other (s State: District: 00 | X General | Туре | PAYROLL EXPENSE | | |
| C. | Full Name (Last, First, Middle Initial) PAYCHEX, INC. Mailing Address 911 PANORAMA TRAIL, S. | | | Date of Disbursement | | |
| | ROCHESTER NY 1 Purpose of Disbursement PAYROLL TAXES | p Code 4625 | | Amount of Each Disbursement this Period 376.11 Transaction ID : SB17.11785 | | |
| | Candidate Name Office Sought: House Disbursement For Senate President Other (s State: District: 00 | X General | Category/ Type | | | |
| s | UBTOTAL of Disbursements This Page (optional) | | | 1195.39 | | |
| т | OTAL This Period (last page this line number only) | | | | | |

| SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS | | Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: PAGE 18 OF 33 (check only one) X 17 18 19a 19b 20a 20b 20c 21 | | |
|---------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | | |
| Α. | Full Name (Last, First, Middle Initial) PAYCHEX, INC. | Date of Disbursement | | | | |
| | Mailing Address 911 PANORAMA TRAIL, S. | | | 02 11 2013 | | |
| | City State ROCHESTER NY | Zip Code 14625 | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement PAYROLL EXPENSES | | | 458.50 Transaction ID : SB17.I1786 | | |
| | Candidate Name | | Category/ Type | - | | |
| | Office Sought: House Disbursement For Senate President Other (s | X General | | PAYROLL EXPENSES | | |
| | State: District: 00 Full Name (Last, First, Middle Initial) | | | | | |
| В. | TAX MATTERS LLC | | | Date of Disbursement | | |
| | Mailing Address 5100 27TH ROAD N | | | | | |
| | City State ARLINGTON VA | Zip Code 22207 | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement TAX SERVICES | | · · · | 225.00 Transaction ID : SB17.11782 | | |
| | Candidate Name | | Category/ Type | | | |
| | Office Sought: House Disbursement For Senate President Other (s State: District: 00 | General | | TAX SERVICES | | |
| C. | Full Name (Last, First, Middle Initial) THE PRINCETON CLUB OF NEW YOR | К | | Date of Disbursement | | |
| 0. | Mailing Address 15 W. 43RD STREET | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | - | p Code 0016 | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement FOOD & BEVERAGE | | · · · · | 2319.08 | | |
| | Candidate Name | | Category/ Type | Transaction ID : SB17.I1783 | | |
| | Office Sought: House Disbursement For Senate President Other (s State: District: 00 | General | · | FOOD & BEVERAGE | | |
| s | UBTOTAL of Disbursements This Page (optional) | | | 3002.58 | | |
| Т | OTAL This Period (last page this line number only) | | | | | |

| | CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: PAGE 19 OF 33 (check only one) X 17 18 19a 19b 20a 20b 20c 21 | |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| | y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | |
| A. | Full Name (Last, First, Middle Initial) THE TOWNSEND GROUP | | | Date of Disbursement | |
| | Mailing Address 1006 PENDLETON STREET | | | 01 09 2013 | |
| | City State ALEXANDRIA VA | Zip Code 22314 | | Amount of Each Disbursement this Period 6940.39 | |
| | Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name | | | Transaction ID : SB17.I1753 | |
| | Office Sought: House Disbursement For Senate Primary President Other (s | X General | Category/ Type | FUNDRAISING CONSULTING | |
| | State: District: 00 Full Name (Last, First, Middle Initial) | pecny) | | | |
| В. | Mailing Address INTERNAL REVENUE SERVICE CENTER | 1 | | Date of Disbursement | |
| | City State OGDEN UT | Zip Code 84201 | | Amount of Each Disbursement this Period | |
| | Purpose of Disbursement TAX PAYMENT | | | 189.00 | |
| | Candidate Name | | Category/ Type | | |
| | Office Sought: House Disbursement For Senate President Other (s State: District: 00 | X General | | TAX PAYMENT | |
| C. | Full Name (Last, First, Middle Initial) VIRGINIA DEPT. OF TAXATION | | | Date of Disbursement | |
| | Mailing Address P.O. BOX 1500 | | | | |
| | RICHMOND VA 2 | p Code 3218 | | Amount of Each Disbursement this Period | |
| | Purpose of Disbursement TAX PAYMENT Candidate Name | | Category/ Type | 76.00 Transaction ID : SB17.I1799 | |
| | Office Sought: House Disbursement For Senate President Other (s State: District: 00 | X General | | TAX PAYMENT | |
| s | UBTOTAL of Disbursements This Page (optional) | | | 7205.39 | |
| | OTAL This Period (last page this line number only) | | | | |

| SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS | | Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: PAGE 20 OF 33 (check only one) X 17 18 19a 19b 20a 20b 20c 21 | | |
|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | | | |
| A. | Full Name (Last, First, Middle Initial) W.B. MASON CO. INC. Mailing Address P.O. BOX 111 | Date of Disbursement | | | | |
| | City State BROCKTON MA Purpose of Disbursement | Zip Code 02303 | | Amount of Each Disbursement this Period 86.06 | | |
| | OFFICE SUPPLIES Candidate Name Office Sought: House Disbursement For: | : 2012 | Category/ Type | | | |
| | Senate Primary President Other (s State: District: 00 | X General | | OFFICE SUPPLIES | | |
| в. | Full Name (Last, First, Middle Initial) WELLS FARGO Mailing Address 41 S. MOGER AVENUE | | | Date of Disbursement | | |
| | City State MOUNT KISCO NY Purpose of Disbursement BANK FEES | Zip Code 10549 | | Amount of Each Disbursement this Period | | |
| | Candidate Name Office Sought: House Disbursement For: | - | Category/ Type | BANK FEES | | |
| | Senate Primary State: District: 00 Full Name (Last, First, Middle Initial) | X General pecify) | | | | |
| C. | Mailing Address 41 S. MOGER AVENUE | | | Date of Disbursement | | |
| | MOUNT KISCO NY 10 Purpose of Disbursement BANK FEES | o Code 0549 | | Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.I1795 | | |
| | Candidate Name Office Sought: House Disbursement For: Senate Primary President Other (spectrum) | X General | Category/ Type | | | |
| | State: District: 00 UBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only) | | | 126.06 | | |

| | CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS | Use separate sch for each category Detailed Summar | of the | FOR LINE NUMBER: (check only one) PAGE 21 OF 33 X 17 18 19a 19b 20a 20b 20c 21 |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | y information copied from such Reports and Statements n for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) Friends of Nan Hayworth | | | |
| Α. | Full Name (Last, First, Middle Initial) WELLS FARGO | | | Date of Disbursement |
| | Mailing Address 41 S. MOGER AVENUE | Zip Code | | Amount of Each Disbursement this Period |
| | MOUNT KISCO NY Purpose of Disbursement BANK FEES | 10549 | | 20.00 Transaction ID : SB17.I1796 |
| | Candidate Name Office Sought: House Disbursement For | r. 2012 | Category/ Type | |
| | Senate Primary President Other (s | K General | | BANK FEES |
| в. | State: District: 00 Full Name (Last, First, Middle Initial) | | | Date of Disbursement |
| | Mailing Address | | | |
| | City State | Zip Code | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | | Category/ Type |] |
| | Office Sought: House Disbursement For Senate Primary President Other (s | General | | |
| C. | Full Name (Last, First, Middle Initial) | | | Date of Disbursement |
| | Mailing Address City State Zi | | | |
| | Purpose of Disbursement | ip Code | | Amount of Each Disbursement this Period |
| | Candidate Name | | Category/ Type | |
| | Office Sought: House Disbursement For Senate Primary President Other (state) | General | | |
| s | UBTOTAL of Disbursements This Page (optional) | | | 20.00 |
| | OTAL This Period (last page this line number only) | | | 60891.79 |

| age# 13961603206 | | | | | |
|-----------------------------------------------------|------------|---------------|--------------|---------------------------------------------------------------------|-----------------------------------------|
| HEDULE C (FEC Form | 3) | | | Use separate schedul for each category of Detailed Summary Pa | the (check only one) X 13a |
| ME OF COMMITTEE (In Full) riends of Nan Hayworth | | | | Transa | ction ID : SC 14 |
| LOAN SOURCE Full Name (Last, Nan Hayworth | First, Mid | Idle Initial) | | [PERSONAL FUNDS] | Election: 2010 Primary General |
| Mailing Address P.O. Box 189 | | | | | Other (specify) V PRIMARY 2010 |
| City | | State | ZIP Code | 9 | |
| Mount Kisco | | NY | 10549 | | |
| Original Amount of Loan | 0.00 | Cumulative P | Payment To D | Date Bal 48000.00 | ance Outstanding at Close of This Perio |
| 7 7 | 0.00 | 9 | 9 | 48000.00 | 5200.00 |
| TERMS Date Incurred | | | Date Due | Interest Rat | te Secured: |
| M 09 ^M / D 26 ^D / Y 2009 | Y | M M / D | D / due o | n demand 0.0 | ° (apr) □ Yes × No |
| List All Endorsers or Guarantors | | o Loan Sourc | | | |
| 1. Full Name (Last, First, Middle I | nitial) | | | Name of Employer | |
| Mailing Address | | | | Occupation | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | |
| 2. Full Name (Last, First, Middle In | nitial) | | | Name of Employer | |
| Mailing Address | | | | Occupation | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | |
| 3. Full Name (Last, First, Middle In | nitial) | | | Name of Employer | |
| Mailing Address | | | | Occupation | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | y |
| 4. Full Name (Last, First, Middle In | nitial) | | | Name of Employer | |
| Mailing Address | | | | Occupation | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | |
| JBTOTALS This Period This Page (| | | | · | 62000.00 7 7 7 |

| age# 13961603207 | | | _ | | | |
|-----------------------------------------------------|--------------|-----------------|---------------------------------|-----------------------------------------------------------------|------------|--------------------------------------------------------------------|
| HEDULE C (FEC Form | 3) | | | Use separate sched for each category o Detailed Summary F | f the | PAGE 23 OF 33 FOR LINE NUMBER: (check only one) X 13a 13b |
| ME OF COMMITTEE (In Full) riends of Nan Hayworth | | | | Trans | action I | D : SC 15 |
| LOAN SOURCE Full Name (Last, Nan Hayworth | First, Middl | e Initial) | l | [PERSONAL FUNDS] | | tion: 2010 Primary General |
| Mailing Address P.O. Box 189 | | | | | | Other (specify) ▼ IMARY 2010 |
| City | S | tate Z | ZIP Code | | | |
| Mount Kisco | | NY | 10549 | | | |
| Original Amount of Loan 40000 | | Cumulative Paym | nent To Dat | te B 0.00 | alance C | Dutstanding at Close of This Perio 40000.00 |
| 7 7 | | <u> </u> | 77 | | | 9 9 9 |
| Date Incurred | Y | Dat | te Due [/] due on d | Interest R demand | ate .00 | Secured: |
| List All Endorsers or Guarantors | (if any) to | Loan Source | | | | Yes No |
| 1. Full Name (Last, First, Middle I | nitial) | | Na | ame of Employer | | |
| Mailing Address | | | 00 | ccupation | | |
| City | State | ZIP Code | Gu | mount uaranteed utstanding: | 7 | · · · · · · · · |
| 2. Full Name (Last, First, Middle In | itial) | | Na | ame of Employer | | |
| Mailing Address | | | 00 | ccupation | | |
| City | State | ZIP Code | Gı | nount uaranteed utstanding: | 7 | |
| 3. Full Name (Last, First, Middle In | itial) | | Na | ame of Employer | | |
| Mailing Address | | | 00 | ccupation | | |
| City | State | ZIP Code | Gu | nount uaranteed utstanding: | 7 | |
| 4. Full Name (Last, First, Middle In | itial) | | Na | ame of Employer | | |
| Mailing Address | | | 00 | ccupation | | |
| City | State | ZIP Code | Gu | nount uaranteed utstanding: | 7 | |
| JBTOTALS This Period This Page (| | | | · L | | 40000.00 |

| age# 13961603208 | | | - | | | |
|---------------------------------------------------------------------------------|-----------------------------------------|-----------------|---------------------|-----------------------------------------------------------------------|---------------------------------------------------|------------------|
| HEDULE C (FEC Form | 3) | | | Use separate schedul for each category of t Detailed Summary Pa | the (check only one) | 33 13a 13b |
| ME OF COMMITTEE (In Full) riends of Nan Hayworth | | | | Transa | action ID : SC 16 | |
| LOAN SOURCE Full Name (Last, Nan Hayworth | First, Middle | e Initial) | | [PERSONAL FUNDS] | Election: 2010 Primary General | |
| Mailing Address P.O. Box 189 | | | | | Other (specify) ▼ PRIMARY 2010 | |
| City | St | ate Z | ZIP Code | | | |
| Mount Kisco | I | NY | 10549 | | | |
| Original Amount of Loan 10000 | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | Cumulative Paym | nent To Da | ate Bal | lance Outstanding at Close of This P 100000.00 | 'erioo |
| TERMS Date Incurred | | Dat | te Due | Interest Rat | te Secured: | |
| ^M 12 ^M / ^D 31 ^D / ^Y 2009 | Y | M / D D | [/] due or | demand 0.0 | 00 % (apr) | (No |
| List All Endorsers or Guarantors | (if any) to L | oan Source | | | 100 | 110 |
| 1. Full Name (Last, First, Middle | Initial) | | 1 | lame of Employer | | |
| Mailing Address | | | (| Occupation | | |
| City | State | ZIP Code | | Amount Guaranteed Dutstanding: | y y | |
| 2. Full Name (Last, First, Middle Ir | nitial) | | 1 | lame of Employer | | |
| Mailing Address | | | (| Occupation | | |
| City | State | ZIP Code | | Mount Guaranteed Dutstanding: | g 1 1 g 1 1 a 1 | |
| 3. Full Name (Last, First, Middle Ir | nitial) | | 1 | lame of Employer | | |
| Mailing Address | | | (| Occupation | | |
| City | State | ZIP Code | | Mount Guaranteed Dutstanding: | y | |
| 4. Full Name (Last, First, Middle Ir | nitial) | | 1 | lame of Employer | | |
| Mailing Address | | | (| Occupation | | |
| City | State | ZIP Code | | mount Guaranteed Dutstanding: | y 1 1 y 1 1 m 1 | |
| UBTOTALS This Period This Page (OTALS This Period (last page in this | s line only) | | | ······ | 100000.00 | |

| age# 13961603209 | | | | | PAGE 25 OF 33 | | |
|---------------------------------|---------------------|---------------|-------------|-------------------------------------------------------------------------------|-------------------------------------------------------|--|--|
| CHEDULE C (FEC Form 3) OANS | | | | Use separate schedule(s) for each category of the Detailed Summary Page | | | |
| ME OF COMMITTEE (In Full) | | | | Transa | action ID : SC 28 | | |
| LOAN SOURCE Full Name | (Last, First, Mic | Idle Initial) | | [PERSONAL FUNDS] | Election: 2010 Primary General | | |
| Mailing Address P.O. Box 189 | | | | | GENERAL 2010 | | |
| City | | State | ZIP Code | ÷ | | | |
| Mount Kisco | | NY | 10549 | | | | |
| Original Amount of Loan | 150000.00 | Cumulative Pa | ayment To D | ate Bal 15500.00 | lance Outstanding at Close of This Perio 134500.00 | | |
| TERMS Date Incurred | žolo ^v | M M / D I | | Interest Rat | | | |
| List All Endorsers or Guar | | o Loan Source | | | | | |
| 1. Full Name (Last, First, M | (IIddle Initial) | | | Name of Employer | | | |
| Mailing Address | | | | Occupation | | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | y | | |
| 2. Full Name (Last, First, Mi | iddle Initial) | | | Name of Employer | | | |
| Mailing Address | | | | Occupation | | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | y | | |
| 3. Full Name (Last, First, Mi | iddle Initial) | | | Name of Employer | | | |
| Mailing Address | | | | Occupation | | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | y y | | |
| 4. Full Name (Last, First, Mi | iddle Initial) | | | Name of Employer | | | |
| Mailing Address | | | | Occupation | | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | g. 1. 1. g. 1. 1. a. 1 | | |
| UBTOTALS This Period This | e in this line only | ʻ) | | ······ | 134500.00 | | |

| age# 13961603210 | | | | | | | | |
|--------------------------------------------------------|-------------------|---------------|-------------|-------------------------------------------------------------------------------|-----------------------------------------|--|--|--|
| CHEDULE C (FEC Form 3) OANS | | | | Use separate schedule(s) for each category of the Detailed Summary Page | | | | |
| ME OF COMMITTEE (In Full) | th | | | Transa | ction ID : SC 30 | | | |
| LOAN SOURCE Full Name Nan Hayworth | (Last, First, Mic | Idle Initial) | | [PERSONAL FUNDS] | Election: 2010 Primary Ceneral | | | |
| Mailing Address P.O. Box 189 | | | | | Other (specify) ▼ GENERAL 2010 | | | |
| City | | State | ZIP Code | ; | _L | | | |
| Mount Kisco | | NY | 10549 | | | | | |
| Original Amount of Loan | 100000.00 | Cumulative P | ayment To D | ate Bala | ance Outstanding at Close of This Perio | | | |
| TERMS Date Incurred | žolo ^v | M M / D | | Interest Rat | | | | |
| List All Endorsers or Guara | | o Loan Source | | | | | | |
| 1. Full Name (Last, First, M | liddle Initial) | | | Name of Employer | | | | |
| Mailing Address | | | | Occupation | | | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | | | | |
| 2. Full Name (Last, First, Mi | ddle Initial) | | | Name of Employer | | | | |
| Mailing Address | | | | Occupation | | | | |
| City | State | ZIP Code | (| Amount Guaranteed Outstanding: | y 1 1 y 1 1 x 1 | | | |
| 3. Full Name (Last, First, Mi | ddle Initial) | | I | Name of Employer | | | | |
| Mailing Address | | | | Occupation | | | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | y 1 y 1 y 1 y | | | |
| 4. Full Name (Last, First, Mi | ddle Initial) | | | Name of Employer | | | | |
| Mailing Address | | | | Occupation | | | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | - y - 1 - y - 1 - x - 1 | | | |
| UBTOTALS This Period This OTALS This Period (last page | in this line only | /) | | ······ | 100000.00 | | | |

| age# 13961603211 | | | | | PAGE 27 OF 33 | | | |
|---------------------------------------------------------------------------|-------------------|---------------|--------------|-------------------------------------------------------------------------------|------------------------------------------|--|--|--|
| CHEDULE C (FEC Form 3) OANS | | | | Use separate schedule(s) for each category of the Detailed Summary Page | | | | |
| ME OF COMMITTEE (In Full) riends of Nan Haywor | th | | | Transa | action ID : SC 32 | | | |
| LOAN SOURCE Full Name Nan Hayworth | (Last, First, Mic | Idle Initial) | | [PERSONAL FUNDS] | Election: 2012 Primary General | | | |
| Mailing Address P.O. Box 189 | | | | | GENERAL 2012 | | | |
| City | | State | ZIP Code | 9 | | | | |
| Mount Kisco | | NY | 10549 | | | | | |
| Original Amount of Loan | 100000.00 | Cumulative F | Payment To D | ate Bal | lance Outstanding at Close of This Perio | | | |
| TERMS Date Incurred | ž012 ^v | | | Interest Ra | | | | |
| List All Endorsers or Guara | | o Loan Sourc | | | | | | |
| 1. Full Name (Last, First, M | iddle Initial) | | | Name of Employer | | | | |
| Mailing Address | | | (| Occupation | | | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | y | | | |
| 2. Full Name (Last, First, Mic | ddle Initial) | | | Name of Employer | | | | |
| Mailing Address | | | | Occupation | | | | |
| City | State | ZIP Code | (| Amount Guaranteed Outstanding: | g 1 g 1 m | | | |
| 3. Full Name (Last, First, Mid | ddle Initial) | | I | Name of Employer | | | | |
| Mailing Address | | | (| Occupation | | | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | y | | | |
| 4. Full Name (Last, First, Mic | ddle Initial) | | | Name of Employer | | | | |
| Mailing Address | | | | Occupation | | | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | g 1 g 1 m | | | |
| JBTOTALS This Period This F DTALS This Period (last page | in this line only | /) | | ······ | 100000.00 | | | |

| age# 13961603212 | | | | | PAGE 28 OF 33 | | | |
|-------------------------------------------------|---------------------|---------------|--------------|-------------------------------------------------------------------------------|-----------------------------------------------------|--|--|--|
| CHEDULE C (FEC Form 3) OANS | | | | Use separate schedule(s) for each category of the Detailed Summary Page | | | | |
| ME OF COMMITTEE (In Full riends of Nan Haywo | , | | | Transac | ction ID : AC 35 | | | |
| LOAN SOURCE Full Name Nan Hayworth | e (Last, First, Mid | Idle Initial) | | [PERSONAL FUNDS] | Election: 2012 Primary General | | | |
| Mailing Address P.O. Box 189 | | | | | Other (specify) ▼ General - 2012 | | | |
| City | | State | ZIP Code | • | | | | |
| Mount Kisco | | NY | 10549 | | | | | |
| Original Amount of Loan | 10033.45 | Cumulative P | Payment To D | ate Bala | ance Outstanding at Close of This Perio 10033.45 | | | |
| TERMS Date Incurren | ž012 ^Y | M M / D | | Interest Rate | | | | |
| List All Endorsers or Guar | | o Loan Source | | Name of Employer | | | | |
| 1. Full Name (Last, First, N | vilddie Initial) | | | vame of Employer | | | | |
| Mailing Address | | | | Dccupation | | | | |
| City | State | ZIP Code | | Amount Guaranteed Dutstanding: | | | | |
| 2. Full Name (Last, First, M | liddle Initial) | | | Name of Employer | | | | |
| Mailing Address | | | | Dccupation | | | | |
| City | State | ZIP Code | | Amount Guaranteed Dutstanding: | y y | | | |
| 3. Full Name (Last, First, M | liddle Initial) | | I | Name of Employer | | | | |
| Mailing Address | | | (| Dccupation | | | | |
| City | State | ZIP Code | | Amount Guaranteed Dutstanding: | -y | | | |
| 4. Full Name (Last, First, M | liddle Initial) | | | Name of Employer | | | | |
| Mailing Address | | | | Dccupation | | | | |
| City | State | ZIP Code | | Amount Guaranteed Dutstanding: | | | | |
| UBTOTALS This Period This | e in this line only |) | | ······ | 10033.45 | | | |

| age# 13961603213 | | _ | | PAGE 29 OF 33 | | |
|-------------------------------------------------------|------------------|----------------|-------------------------------------------------------------------------------|------------------------------------------|--|--|
| CHEDULE C (FEC Form 3) OANS | | | Use separate schedule(s) for each category of the Detailed Summary Page | | | |
| AME OF COMMITTEE (In Full) | | | Transa | action ID : SC 33 | | |
| LOAN SOURCE Full Name (Last, First, N Nan Hayworth | Aiddle Initial) | I | PERSONAL FUNDSJ | Election: 2012 Primary General | | |
| Mailing Address P.O. Box 189 | | | | Other (specify) ▼ General - 2012 | | |
| City | State | ZIP Code | | | | |
| Mount Kisco | NY | 10549 | | | | |
| Original Amount of Loan 63500.00 | Cumulative Pa | Payment To Dat | te Bal | lance Outstanding at Close of This Perio | | |
| TERMS | 7 | , , | | | | |
| Date Incurred | | Date Due | Interest Rat demand 0.0 | | | |
| List All Endorsers or Guarantors (if any) |) to Loan Source | e | | | | |
| 1. Full Name (Last, First, Middle Initial) | | Na | ame of Employer | | | |
| Mailing Address | | 0 | ccupation | | | |
| City State | ZIP Code | Gi | mount uaranteed utstanding: | y | | |
| 2. Full Name (Last, First, Middle Initial) | | Na | ame of Employer | | | |
| Mailing Address | | 0 | ccupation | | | |
| City State | ZIP Code | Gi | mount uaranteed utstanding: | y | | |
| 3. Full Name (Last, First, Middle Initial) | | Na | ame of Employer | | | |
| Mailing Address | | 0 | ccupation | | | |
| City State | ZIP Code | Gi | mount uaranteed utstanding: | y y | | |
| 4. Full Name (Last, First, Middle Initial) | | Na | ame of Employer | | | |
| Mailing Address | | 0 | ccupation | | | |
| City State | ZIP Code | Gi | mount uaranteed utstanding: | y 1 1 y 1 1 A 1 | | |
| UBTOTALS This Period This Page (optiona | | | · L | 63500.00 | | |
| OTALS This Period (last page in this line o | | | | 610033.45 | | |

| SCHEDULE D (FEC Form 3) | | (Use separate | PAGE 30 OF 33 |
|------------------------------------------------------|-----------------------------------|-------------------------|----------------------------------------|
| DEBTS AND OBLIGATIONS | | schedule(s) for each | FOR LINE NUMBER: (check only one) 9 |
| | | numbered line) | X 10 |
| Friends of Nan Haywor | th | | |
| A. Full Name (Last, First, Middle Initial) of Debtor | | | ebt (Purpose): |
| Paula Colarusso | | fundraising | consulting |
| Mailing Address 1544 Star Route 203 | | | |
| City State Chatham | Zip Code NY 12037 | | |
| Outstanding Balance Beginning This Period | 12037 | Transactio | on ID : 14 |
| 39564.10 | | | |
| Amount Incurred This Period | Payment This Period | Outstandi | ng Balance at Close of This Period |
| 1975.00 | 1975 | 5.00 | 39564.10 |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of D | ebt (Purpose): |
| Airnet Group, Inc. | | Telephone | & Telecomm Services |
| Mailing Address P.O. Box 11181 | | | |
| City State Chattanooga | Zip Code TN 37401 | | |
| Outstanding Balance Beginning This Period | | Transactio | on ID : 1 |
| 1713.36 | | | |
| Amount Incurred This Period | Payment This Period | Outstandi | ng Balance at Close of This Period |
| 0.00 | 0 | 0.00 | 1713.36 |
| C. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | | ebt (Purpose): Photocopying |
| AtlasStar | | | notocopying |
| Mailing Address 753 Route 9, P.O. Box 436 | | | |
| City Fishkill | State Zip Code NY 12524 | | |
| Outstanding Balance Beginning This Period | 12324 | Transact | ion ID : 2 |
| 269.79 | | | |
| Amount Incurred This Period | Payment This Period | Outstandi | ng Balance at Close of This Period |
| 0.00 | 269 | 9.79 | 0.00 |
| 1) SUBTOTALS This Period This Page (optional) | | | 41277.46 |
| 2) TOTALS This Period (last page this line number | | | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C | ; (last page only) | | |
| 4) ADD 2) and 3) and carry forward to appropriate | line of Summary Page (last page o | nly) 🕨 | 9 1 9 1 1 1 |

FEC Schedule D (Form 3) (Revised 02/2003)

| SCHEDULE D (FEC Form 3) | | (Use separate | PAGE 31 OF 33 |
|-------------------------------------------------------------------------|----------------------------------|-------------------------------------------|------------------------------------------------|
| DEBTS AND OBLIGATIONS Excluding Loans | | schedule(s) for each numbered line) | FOR LINE NUMBER: (check only one) 9 X 10 |
| NAME OF COMMITTEE (In Full) | | · | |
| Friends of Nan Haywort | h | | |
| A. Full Name (Last, First, Middle Initial) of Debtor Cablevision | or Creditor | Nature of D Cable Tele | ebt (Purpose): vision |
| Mailing Address P.O. Box 9256 | | | |
| City State Chelsea | Zip Code MA 02150 | | |
| Outstanding Balance Beginning This Period 149.33 | | Transactio | |
| Amount Incurred This Period 0.00 | Payment This Period | 0.00 | ng Balance at Close of This Period 149.33 |
| B. Full Name (Last, First, Middle Initial) of Debtor Campaign Solutions | or Creditor | | lebt (Purpose): Iraising / web hosting |
| Mailing Address 117 North Saint AsaphStreet | | | |
| City State Alexandria | Zip Code VA 22314 | | |
| Outstanding Balance Beginning This Period 1758.84 | | Transactio | on ID : 4 |
| Amount Incurred This Period | Payment This Period | Outstandi | ng Balance at Close of This Period |
| 0.00 | 0 | .00 | 1758.64 |
| C. Full Name (Last, First, Middle Initial) of Debtor Creative Direct | or Creditor | Nature of D Graphic De | lebt (Purpose): esigh |
| Mailing Address 25 E. Main Street | | | |
| City Richmond | StateZip CodeVA23219 | | |
| Outstanding Balance Beginning This Period | | Transact | ion ID : 6 |
| 28630.00 | | | |
| Amount Incurred This Period 0.00 | Payment This Period 28630 | | ng Balance at Close of This Period 0.00 |
| | 7 7 7 | | 7 7 7 |
| 1) SUBTOTALS This Period This Page (optional) | | | 1907.97 |
| 2) TOTALS This Period (last page this line number of | only) | ···· ► | 7 7 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C | ; (last page only) | ···· ► | 9 9 9 |
| 4) ADD 2) and 3) and carry forward to appropriate | ine of Summary Page (last page o | nly) 🕨 | y |

| FEC | Schedule | п | (Eorm | 3) | (Rovisod | 02/2003) | |
|-----|----------|---|---------|----|----------|----------|--|
| FEC | Schedule | υ | (FOIIII | 3) | (neviseu | 02/2003) | |

| SCHEDULE D (FEC Form 3) | | | | | PAGE 32 OF 33 |
|----------------------------------------------------------------------------|---------------|--------------------|------------|----------------------------|------------------------------------|
| | | | | e separate nedule(s) | FOR LINE NUMBER: |
| DEBTS AND OBLIGATIONS | | | | or each | (check only one) 9 |
| Excluding Loans | | | | bered line) | X 10 |
| NAME OF COMMITTEE (In Full) | | | • | | |
| Friends of Nan Haywor | th | | | | |
| A. Full Name (Last, First, Middle Initial) of Debtor | r or Creditor | | | | ebt (Purpose): |
| The Management Companies | | | | rent | |
| Mailing Address 78 North STate Road | | | | | |
| City State | Zip Code | | | | |
| Briarcliff Manor | NY | 10510 | | | |
| Outstanding Balance Beginning This Period | | | | Transactio | on ID : 8 |
| 1000.00 | | | | | |
| Amount Incurred This Period | Pa | yment This Period | 1 | Outstandi | ng Balance at Close of This Period |
| 0.00 | | | 0.00 | | 1000.00 |
| | | | | | |
| B. Full Name (Last, First, Middle Initial) of Debtor The Townsend Group | or Creditor | | | Nature of D fundraising | ebt (Purpose): consulting |
| Mailing Address 1006 Pendleton Street | | | | | |
| City State | Zip Code | | | | |
| Alexandria | VA | 22314 | | | |
| Outstanding Balance Beginning This Period | | | | Transactio | on ID : 9 |
| 6940.39 | | | | | |
| Amount Incurred This Period | Pa | yment This Period | l | Outstandi | ng Balance at Close of This Period |
| 0.00 | 7 | 6 | 6940.39 | | 0.00 |
| C. Full Name (Last, First, Middle Initial) of Debtor | r or Creditor | | | Natura of D | ebt (Purpose): |
| W.B. Mason | | | | office supp | |
| Mailing Address P.O. Box 981101 | | | | | |
| City | State | Zip Code | | | |
| Boston | MA | 02298 | | | |
| Outstanding Balance Beginning This Period | | | | Transact | ion ID : 10 |
| | | | | | |
| 86.06 | | | | | |
| Amount Incurred This Period | Pa | yment This Period | 1 | Outstandi | ng Balance at Close of This Period |
| 0.00 | | | 86.06 | | 0.00 |
| | | | | | 1000.00 |
| SUBTOTALS This Period This Page (optional) | | | | | 7 |
| 2) TOTALS This Period (last page this line number | | | | | <u> </u> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C | | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate | line of Summ | ary Page (last pag | ge only) 🕨 | | 9 9 9 |

FEC Schedule D (Form 3) (Revised 02/2003)

| SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS | | (Use separate schedule(s) for each | PAGE 33 OF 33 FOR LINE NUMBER: (check only one) 9 |
|-----------------------------------------------------------------|------------------------------|------------------------------------------|---------------------------------------------------------|
| Excluding Loans | | numbered line) | (childen dring) childy X 10 |
| NAME OF COMMITTEE (In Full) | | | |
| Friends of Nan Hayworth | | Nature of D | ebt (Purpose): |
| A. Full Name (Last, First, Middle Initial) of Debtor or Verizon | Creditor | | & Telecomm Services |
| Mailing Address P.O. Box 408 | | | |
| City State Newark | Zip Code NJ 07101 | | |
| Outstanding Balance Beginning This Period 298.67 | | Transactio | on ID : 12 |
| Amount Incurred This Period | Payment This Period | Outstandi | ng Balance at Close of This Period |
| 0.00 | , | 0.00 | 298.67 |
| B. Full Name (Last, First, Middle Initial) of Debtor or | Creditor | Nature of D | ebt (Purpose): |
| Mailing Address | | | |
| City State | Zip Code | | |
| Outstanding Balance Beginning This Period | | | |
| Amount Incurred This Period | Payment This Period | Outstandi | ng Balance at Close of This Period |
| C. Full Name (Last, First, Middle Initial) of Debtor or | Creditor | Nature of D | ebt (Purpose): |
| | | | |
| Mailing Address | | | |
| City | State Zip Code | | |
| Outstanding Balance Beginning This Period | | | |
| Amount Incurred This Period | Payment This Period | Outstandi | ng Balance at Close of This Period |
| | | | y |
| 1) SUBTOTALS This Period This Page (optional) | | | 298.67 |
| 2) TOTALS This Period (last page this line number only | /) | ► | 44484.10 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (la | ast page only) | | 610033.45 |
| 4) ADD 2) and 3) and carry forward to appropriate line | of Summary Page (last page o | nly) 🕨 | 654517.55 |

FEC Schedule D (Form 3) (Revised 02/2003)