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FEC FORM 3

Only

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED
2012 APR 18 AM 11: 17

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12 FE 4M5	CENTER
ADDRESS (number and street) Check if different than previously reported. (ACC)	For Congress 2,150,1,57 Suite Z St. Peters		``	7,121-
2. FEC IDENTIFICATION N	3. IS T	TY NEW PORT (N) OR	STATE AMENDED (A)	ZIP CODE TO STATE TO DISTRICT
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	Report (Q1) eport (Q2) dy Report (Q3) d Report (YE) (TER)	Primary (12P) Convention (12C) And Man	General (12G) Special (12S) the: Runoff (30R)	in the State of Special (30S) in the State of
5. Covering Period	1 01 801	Z through 💆	3 91 2	CONTRACTOR CONTRACTOR
I certify that I have examined the Type or Print Name of Treasure Signature of Treasurer NOTE: Submission of false, erron	Sun) (Aystar	Date Samplement of	D D A A A A A A A A A A A A A A A A A A
Office Use Only				EC FORM 3 (Revised 02/2003)

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	SUMMARY PAGE
FEC Form 3 (Revised 02/2003)	of Receipts and Disbursemen

eipts and Disbursements Page 2

W	rite d	or Type Committee Name	for Congress	
R	eport	t Covering the Period: From:	57 6 1 20 YZ To	: [03] 13° 120°Z
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
i .	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	The second secon	
	(b)	Total Contribution Refunds (from Line 20(d))	and the second of the second	general parameter and the second parameter and the contract of
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	13 424 60	13 424 00
·.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	509 89	province of the street of the
	(b)	Total Offsets to Operating Expenditures (from Line 14)	promogrammy promogrammy ming many management of the second second second second second second second second se	paratemagamanapra oranje van sejeta oranjeh nisejeta iz patemaja iz patemaja iz se nazvije oranjena oranje V
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	509.89	50989
3.		sh on Hand at Close of porting Period (from Line 27)	1361411	
).	the	ots and Obligations Owed TO Committee (Itemize all on ledule C and/or Schedule D)	grams respectively secretarized and the secretarized respectively and the secretarized respectively and the secretarized respectively and the secretarized respectively and the secretarized respectively.	
0.	the	ots and Obligations Owed BY Committee (Itemize all on needule C and/or Schedule D)	The state of the s	

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

FEC Form 3 (Revised 12/2003)

of Receipts

Page 3

Write or Type Committee Name

Nina Hayden for Congress

Report Covering the Period:

707078470707

From:

[81] [81] [8612]

To:

Q3.

31

2012

		I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CO	NTRIBUTIONS (other than loans) FROM:		
	(a)	Individuals/Persons Other Than		
		Political Committees (i) Itemized (use Schedule A)	743360	The second secon
		(ii) Uniternized	5.741.00	5.781.00
		(iii) TOTAL of contributions from individuals	13 424 00	1341400
	(b)	Political Party Committees	90	
	(c)	Other Political Committees (such as PACs)	02	
	(d) (e)	The Candidate TOTAL CONTRIBUTIONS	en militare de contract en adecuario de contra	the state of the s
		(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	13 434 60	the control of the state of the
12.		ANSFERS FROM OTHER THORIZED COMMITTEES	The same of the sa	primangamangsunong panang unampun mapon ng primanganan ng managgamananang Sanang kanang panang panang panang panang pangka anaka su si tau makanang panang panang panang panang panang p Sanang panang panang panang panang panang pang p
13.	LO	ANS:		
	(a)	Made or Guaranteed by the Candidate	and the second s	10000
	(b)	All Other Loans		
	(c)	TOTAL LOANS (add Lines 13(a) and (b))		person speciment of the conference of the confer
14.	OF	FSETS TO OPERATING	·	
		PENDITURES funds, Rebates, etc.)	and the state of t	g descriptions from inspection of the contract
15.		HER RECEIPTS		grammer and the control of the contr
16.	11(TAL RECEIPTS (add Lines e), 12, 13(c), 14, and 15) Irry Total to Line 24, page 4)	13524.00	parameter expression and the second s

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DETAILED SUMMARY PAGE

of Disbursements

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17.	OPERATING EXPENDITURES	To the state of th	Foreign segment and the contract contra	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	्रात्राच्याच्याक्षक्रम् स्थाप्त्राक्षक्ष पुरस्कतास्य कार्यः स्थाप्त्राच्याच्याच्याच्याच्याक्षक्षक्षक्ष्याच्या चित्रां	gene angeweiseper's aggress of mes agains agains agains angewer. Town sissel, sa di dis me all arms describer menderment and plant and to make manular. A clike a crive and	
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate			
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees			
	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	Solution of the second	respondence time and it is watched a relative and describe a way to a relative, as if it is a relative and the control of the	
	III. CASH SU	JMMARY		
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	and the second time and the second control of the second control o	
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	13524.00	
25.	SUBTOTAL (add Line 23 and Line 24)	······································	The second secon	
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	504 89	
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)		13614111	

SCHEDULE A	(FEC Form	3)
ITEMIZED REC	EIPTS	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one)
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Nina Handen For Congress		
A. Dagonetti, Philip G. Mailing Address City State	Zip Code	Date of Receipt
Seminale FL	33776	Amount of Each Receipt this Period
	n Vey Cycle-to-Date	herewise and here are the recording to the second and the second a
City State	J435 Zip Code	Date of Receipt 2012
federal political committee. Name of Employer Cocupation Occupation	33742 weeten actions against	Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) C. Sweet Lawre Mailing Address 1964 Lawring Cull Lare City State	- H 1321 Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Occupation Occupation	33742 nousegor i conquessing and control of	Amount of Each Receipt this Period
Other (specify) SUBTOTAL of Receipts This Page (optional)		And confinenced worth and and education of the confinenced worth and a second and a
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SCHEDULE A (FEC Form 3)

PAGE 2 FOR LINE NUMBER: OF Use separate schedule(s) (check only one) √11a 11c 11d

for each category of the **ITEMIZED RECEIPTS** Detailed Summary Page 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) Nina Hayden Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 41321 (જો) City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committée. Name of Employer Occupation Sweet Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt BUCH Wason Mailing Address City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Nove Receipt For: **Election Cycle-to-Date** Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City Zip Code State FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Nuse Receipt For: Election Cycle-to-Date Primary General 358,00 Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	(check only one)
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Full Name (Last, First, Middle Initial) Marion Mailing Address City State State	Zip Code 377) l'O	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Occupation	anagamenta aparanta aparanta gi antikangan kan pengananan pengananan kan pengananan kan pengananan kan penganan	Amount of Each Receipt this Period
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Full Name (Last, First, Middle Initial) Hit Mon's Mailing Address 2550 354 Are Noft City State	Zip Code	Date of Receipt
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NAME OF COMMITTEE (In Full) Nina Hayden Fo	ir Congn	ట్	·
Full Name (Last, First, Middle Initial) Cordes, Charles W. Mailing Address (3459 - 29th Auc N City	State Z	ip Code 33710	Date of Receipt
FEC ID number of contributing federal political committee.	C	energy servingense ingrenesagen en g	Amount of Each Receipt this Period
KURG Law	Election Cycle-to	-Date 2.50.00	
Full Name (Last, First, Middle Initial) Mailing Address Sa Dolohn Drive			Date of Receipt
FEC ID number of contributing federal political committee.	ru IC	ip Code 33706	Amount of Each Receipt this Period
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Full Name (Last, First, Middle Initial)		97.0.00	·
Mailing Address Beach Once ME		(ip Code	Date of Receipt O3 3 20 2
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Primary General Other (specify)	Election Cycle-ii	•	
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Or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	address of any political committe	a to solicit contributions from such committee.
	Nine Hayden	For G	ongress	
A.	Full Name (Last, First, Middle Initial) Atticker (Def W.			Date of Receipt
~ •	Mailing Address O Box 1908			03 28 2012
	Tuber Island	State	Zip Code 31328	
	FEC ID number of contributing federal political committee.		ingeningenskapnerkynnerynernynnergening	Amount of Each Receipt this Period
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	Receipt For: Primary General	Election C	ycle-t Date	
	Other (specify)	Laureteration	50000	
В.	Full Name (Last, First, Middle Initial) Minustry, Jeffrey J	_		Date of Receipt
ъ.	Mailing Address 113D Eden Isle Ct. 1			63 69 2012
	City St. Petasting T	State	Zip Code 33764	Inacide State Severational Severation medicanative and
	FEC ID number of contributing federal political committee.	C	angs maring as manggares sing prameray as on significant of a second of a seco	Amount of Each Receipt this Period
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	Full Name (Last, First, Middle Initial) Shuth Marane			Date of Receipt
C.	Mailing Address	· .		
	City 904 Lake Palms (State State	Zip Code	- 103 NE 120 124
•	Lago	<u>FL</u>	33771	
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s	UBTOTAL of Receipts This Page (optional)			1,000.00
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Name of Employer

Primary

Self employed

Other (specify)

General

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF (check only one)
Any information copied from such Reports and State or for commercial purposes, other than using the results of the state o	atements may not be sold or used by any per name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (IN FUI) Nina Hayden For	Congress	
Full Name (Last, First, Middle Initial) A. Salmon, Powline A Mailing Address City St. Petersburg, Fi	State Zip Code	Date of Receipt
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Full Name (Last, First, Middle Initial) B. Salmon, Samou		Date of Receipt
Mailing Address 915 15t Ave N City St. Petersborg	State Zip Code	63 61 8017
FEC ID number of contributing federal political committee.	C 33 105	Amount of Each Receipt this Period
Name of Employer Cooldman9 Wetzel PLC	Occupation aways	
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
c. Full Name (Last, First, Middle Initial) Mailing Address HXID Energon Ave	7- vb	Date of Receipt
St. Petersbig F	State Zip Code	
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Occupation

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Election Cycle-to-Date

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 9 (check only one) 11a 11b 11c 11d 11d 12 13a 13b 14 15
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NAME OF COMMITTEE (In Full) Nina Hayden Fo		
Full Name (Last, First, Middle Initial) A. Coy Theresa Jean P Mailing Address (607 W. City Tomos		Date of Receipt
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Receipt For: Primary General Other (specify)	Occupation Other Person Election Cycle-to-Date 50000	A mendings and many medican consider an anti-secret policy and many and frequent in an anti-secret
City	YWOY, #120 State Zip Code	Date of Receipt
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Name of Employer Public Defenders Office Receipt For: Primary General Other (specify)	Occupation AHbrus Election Cycle-to-Date	2 5 0 65 - Commission of Superioration with history Service Superioration of the contract of t
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·.		FEC Schedule A (Form 3) (Revised 02/200

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PAGE FOR LINE NUMBER: OF SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the 11a ITEMIZED RECEIPTS 11b 11c Detailed Summary Page 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) Full Name (Last, First, Middle Initial) <u>M;nns</u> Date of Receipt Mailing Address City Zip Code *Lotton* 47 **೨**೨೦೨೪ FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Contractor 30 heed Makin Receipt For: Election Cycle-to-Date Primary General 00.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Addres St. 200 McMviler Booth Rd Zip Code 33つらの City State Necousto FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Occupation Name of Employer Attorney Receipt For: Election Cycle-to-Date Primary General 200 00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt C. Mailing Address 410) Zip Code City State FL FEC 1D number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Honey Receipt For: Election Cycle to-Date Primary General 350.00 Other (specify) SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE A (FEC Form 3)

Use separate schedule(s)

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NAME OF COMMITTEE (In Full) Nina Hayden For Con	igress						
Full Name (Last, First, Middle Initial) Nouden ITT, Melvyn Mailing Address 3500 Olive Broth Dr. City State FEC ID number of contributing federal political committee. Name of Employer Altegheny East Conferme Minit	Zip Code 20904 and the control of	<u> </u> වි3	Receipt 36			eriod	50
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SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one)
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) for each category of the 17 19b **Detailed Summary Page** 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

\rangle	Name of committee in full) Nina Hayden For Congress		
	Full Name (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·	
Α.	PayPal		Date of Disbursement
	Mailing Address 11 N- 1 St St		
	City San Josk CA 95131		Amount of Each Disbursement this Period
	Purpose of Disbursement Merchent acct fees	003	to the contract of the contrac
	Candidate Name Who Hayden	Category/ Type	
	Office Sought: House Disbursement For: Senate President Other (specify) State: District:		
В.	Full Name (Last, First, Middle Initial)		Date of Disbursement
	Mailing Address 3 St C		03 3/ 2012
	City State Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement Purpose of Disbursement	Contraction of the contraction o	3.20
	Candidate Name	OO3 Category/	tara nattana natamarat novasilani wa harroa tamanikari wa kasa a ta matama nati
	Office Sought: House Disbursement For:	Type	
	Senate Primary General Other (specify) State: District:		
	Full Name (Last, First, Middle Initial)		Date of Disbursement
C.	Pay Pal		Date of Disbursament
	Mailing Address 2211 N. 158 57		Control Control Remarks
	Sch Jose CA 95131		Amount of Each Disbursement this Period
	merch act fees	003	3.20
	Candidate Name Nina Hayden Office Sought: Let House Dishursement For	Category/ Type	
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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SCHEDULE C (FEC F LOANS	orm 3)		for each ca	ate schedule(s) ategory of the ummary Page	PAGE FOR LINE NUMB((check only one)	OF 13a 13b
NAME OF COMMITTEE (In Full)	or Congress					
LOAN SOURCE Full Name		dle Initial)		Ele	ection: Primary General	·
	St Axes				Other (specify)	
St. Petersbur	g F	- .	571Z			
Original Amount of Loan	0000	Cumulative Payment			Outstanding at Close	e of This Period
Date Incurred O3 (8) (2) List All Endorsers or Guard 1. Full Name (Last, First, N	antors (if any) to	conference krospolicycoli fiza	DOVZ.	Interest Rate		ecured: Yes No
Mailing Address	nuole filitaly		Occupation Amount	SCHOOLS SERVICE SERVIC		E TORRESCO DE SERVICIO
City	State	ZIP Code	Guaranteed Outstanding:	Samuel Comment of the	scretteres milles es estill secondices com electron	Simulana -
2. Full Name (Last, First, M	ddle Initial)		Name of Emp	oloyer		
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Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:		en paragramatina esperante esperante esperante esperante esperante esperante esperante esperante esperante esp Transferência esperante esperante esperante esperante esperante esperante esperante esperante esperante esperan	
4. Full Name (Last, First, M	iddle Initial)		Name of Emp	oloyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
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TOTALS This Period (last page Carry outstanding balance on		·		Kataladku suu	CONTRACTOR OF THE PROPERTY OF	OD 60

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

Supplementary for Information found on Page _____ of Schedule C

Federal Election Commission, Washington, D.C. 20463				
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER		
Nina Hayden For Congress		COO514 3 50		
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)		
Full Name	รื่องเลงเราการเราการเราการเราการเราการเราการเราการเราการเราการเราการเราการเราการเราการเราการเราการเราการเราการ	principle sequences of the sequences		
АИ	To martin make marifice, who came to car different boards	The residence in the second se		
Mailing Address	Date Incurred or Established	March 12 18 18 18 18 18 18 18 18 18 18 18 18 18		
City State Zip Code	Date Due	Respectivement Association on the mathematic		
A. Has loan been restructured? No Yes If yes, date originally incurred				
B. If line of credit, Amount of this Draw:	Outstanding	กลังสู่ รูกราชกรรณ เกาะกลู่ เขาสารสุดและสรุดและกรรณ เกาะกลังสุดเกาะกรรณ รูกกระหายสูญและเลยสุดเกระ กระเรีย เกาะกลังสุดเกรายกลังสุดเกรายกลังสุดเกรายกลังสุดเกรายกลังสุดเกรายกลังสุดเกรายกลังสุดเกรายกลังสารสุดเกรายกลังสรร		
C. Are other parties secondarily liable for the debt incu	rrea? rust be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates stocks, accounts receivable, cash on deposit, or oth No Yes If yes, specify:	of deposit; chattel papers,	nat is the value of this collateral?		
Tes II yes, specily.	Do	es the lender have a perfected security		
		erest in it? No Yes		
E. Are any future contributions or future receipts of inte collateral for the loan? No Yes If yes,	specify:	hat is the estimated value?		
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).				
	Address:			
Date account established:	City, State, Zip:			
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.				
G. COMMITTÉE TREASURER		DATE		
Typed Name Signature				
H. Attach a signed copy of the loan agreement.				
I. TO BE SIGNED BY THE LENDING INSTITUTION:				
 I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for 				
similar extensions of credit to other borrowers III. This institution is aware of the requirement that complied with the requirements set forth at 11	of comparable credit worthiness. t a loan must be made on a basis v	which assures repayment, and has		
AUTHORIZED REPRESENTATIVE		DATE		
Typed Name	2.1	MANAGE VERTON VERTONIA		
Signature	itle	The control of the co		

SCHEDULE D (FEC Form 3)		(Use separate	PAGE OF
DEBTS AND OBLIGATIONS		schedule(s)	FOR LINE NUMBER:
Excluding Loans		for each numbered line)	(check only one)
NAME OF COMMITTEE (In Full)	•	1	1 10
Mina Hauden For Cone	UCSS .		
A. Full Name (Last, First, Middle Initial) of Deb	<u> </u>	Nature of [Debt (Purpose):
Mailing Address			
City State	Zip Code	,	
Outstanding Balance Beginning This Period			
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Amount Incurred This Period	Payment This Period		ling Balance at Close of This Period
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			Debt (Purpose):
B. Full Name (Last, First, Middle Initial) of Debt	or or Greattor	Nature of	Deat (Purpose).
Mailing Address			
City State	Zip Code		
Outstanding Balance Beginning This Period	Payment This Period		ding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Det	otor or Creditor	Nature of	Debt (Purpose):
Mailing Address			
City	State Zip Code		
Outstanding Balance Beginning This Period		<u></u>	
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3) TOTAL OUTSTANDING LOANS from Schedu	le C (last page only)	·····	Color of the color
4) ADD 2) and 3) and carry ferward to appropri	ate line of Summary Page (last page		100,60

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

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt** Hand Delivered **Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

(3/2005)