SECRETARY OF THE SENATE
07 OCT 16 AM 11:04
Office Use Only

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

DANIEL MONGIARDO FOR US SENATE

ADDRESS (number and street) ▼ P.O. BOX 4147

☐ Check if different than previously reported. (ACC)

CITY ▲ FRANKFORT STATE ▲ KY ZIP CODE ▲ 40604 -

2. FEC IDENTIFICATION NUMBER ▼ C 00393009

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

STATE ▼ KY DISTRICT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☒ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ Termination Report (TER)

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

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(c) 30-Day POST-Election Report for the:

☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 07 / 01 / 2007 through 09 / 30 / 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer ROBERT W. KELLERMAN

Signature of Treasurer Robert W. Kellerman, Treasurer 10 / 15 / 2007

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

Office Use Only							

FEC FORM 3 (Revised 02/2003)

FE5AN018

27020363427

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
DANIEL MONGIARDO FOR US SENATE

Report Covering the Period: From: 07 / 01 / 2007 To: 09 / 30 / 2007

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	0.00	7035.54
(b) Total Contribution Refunds (from Line 20(d))	0.00	290.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	6754.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	40.25	196581.09
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	2038.11
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	40.25	194542.98
8. Cash on Hand at Close of Reporting Period (from Line 27)	8162.22	
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)	606593.77	

For further information contact:

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

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

27020363428

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

DANIEL MONGIARDO FOR US SENATE

Report Covering the Period: From: 07 / 01 / 2007 To: 09 / 30 / 2007

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	3970.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	3970.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	3065.54
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	7035.54
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS: (a) Made or Guaranteed by the Candidate	7800.00	7800.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	7800.00	7800.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	2038.11
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	81443.18
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	7800.00	98316.83

27020362429

FE5AN018

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	40.25	196581.09
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	290.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	290.00
21. OTHER DISBURSEMENTS	0.00	25500.00
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	40.25	222371.09

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	402.47
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	7800.00
25. SUBTOTAL (add Line 23 and Line 24)	8202.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	40.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	8162.22

27020363430

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) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 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.

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

A.
Full Name (Last, First, Middle Initial): AMERICAN FOUNDERS BANK
Mailing Address: 201 LIMESTONE DR.
City: FRANKFORT State: KY Zip Code: 40601
Purpose of Disbursement: Service Charge
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: [x] Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 31 / 2007
Amount of Each Disbursement this Period: 8.00
☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): US POSTMASTER
Mailing Address: 1210 WILKINSON BLVD.
City: FRANKFORT State: KY Zip Code: 40601
Purpose of Disbursement: P.O. Box Rental
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: [x] Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 13 / 2007
Amount of Each Disbursement this Period: 16.25
☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): AMERICAN FOUNDERS BANK
Mailing Address: 201 LIMESTONE DRIVE
City: FRANKFORT State: KY Zip Code: 40601
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: [x] Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 31 / 2007
Amount of Each Disbursement this Period: 8.00
☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 32.25

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

27020362431

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) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 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.

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

A.

Full Name (Last, First, Middle Initial): AMERICAN FOUNDERS BANK

Mailing Address: 201 LIMESTONE DRIVE

City: FRANKFORT State: KY Zip Code: 40601

Purpose of Disbursement:

Candidate Name:

Category/Type:

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: [x] Primary ☐ General ☐ Other (specify)

Date of Disbursement: 09 / 30 / 2007

Amount of Each Disbursement this Period: 8.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial):

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Category/Type:

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial):

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Category/Type:

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 8.00

TOTAL This Period (last page this line number only) ▶ 40.25

27020263432

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 7

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

Transaction ID: L1

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

Mailing Address 200 Medical Center Dr

City Hazard State KY ZIP Code 41701-9466

Election:
[X] Primary
[ ] General
[ ] Other (specify)

Original Amount of Loan: 6000.00

Cumulative Payment To Date: 0.00

Balance Outstanding at Close of This Period: -6000.00

TERMS

Date Incurred: M M 11 D D 15 Y Y Y Y 2003

Date Due:

Interest Rate: .0000 % (apr)

Secured: [ ] Yes [X] No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ..... ▶ 6000.00

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

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

FEC Schedule C (Form 3) Rev. 02/2003

27020362422

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 8

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

Transaction ID: L2

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

Election: [X] Primary [ ] General [ ] Other (specify)

Mailing Address 200 Medical Center Dr

City Hazard State KY ZIP Code 41701-9466

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200000.00	92580.89	107419.11

TERMS

Date Incurred (M M)	(D D)	(Y Y Y Y)	Date Due	Interest Rate	Secured:
12	31	2003		.0000 % (apr)	[ ] Yes [X] No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ..... ▶ 107419.11

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

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

27020363434

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 9

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

Transaction ID: L363

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

Election: [ ] Primary [X] General [ ] Other (specify)

Mailing Address 200 Medical Center Dr

City Hazard State KY ZIP Code 41701-9466

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500000.00	86736.10	413263.90

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due	Interest Rate	Secured:
06 30 2004		.0000 % (apr)	[ ] Yes [X] No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ..... ▶	413263.90
TOTALS This Period (last page in this line only) ..... ▶	526683.01

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

FEC Schedule C (Form 3) Rev. 02/2003

27020363435

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 10

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

Transaction ID: L363

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

Election: [ ] Primary [X] General [ ] Other (specify)

Mailing Address 200 Medical Center Dr

City Hazard State KY ZIP Code 41701-9466

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7800.00	-0-	7800.00

TERMS

Date Incurred (M M)	(D D)	(Y Y Y Y)	Date Due	Interest Rate	Secured:
09	21	2007	Demand	.0000 % (apr)	[ ] Yes [X] No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ..... ▶ 7800.00

TOTALS This Period (last page in this line only) ..... ▶ 534483.01

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

FEC Schedule C (Form 3) Rev. 02/2003

27020363436

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 11

FOR LINE NUMBER: (check only one) [ ] 9 [X] 10

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

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

Mailing Address PO Box 30523

City Tampa State FL ZIP Code 33630-3523

Nature of Debt (Purpose): Staff Cell Phone 01416644-001-01

Outstanding Balance Beginning This Period: 138.75

Transaction ID: D92952

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 138.75

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

Mailing Address 1255 Eastland Dr

City Lexington State KY ZIP Code 40505-3822

Nature of Debt (Purpose): stationery

Outstanding Balance Beginning This Period: 732.67

Transaction ID: D87381

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 732.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Courier Journal

Mailing Address 525 W Broadway

City Louisville State KY ZIP Code 40202-2206

Nature of Debt (Purpose): Subscription

Outstanding Balance Beginning This Period: 50.28

Transaction ID: D92953

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 50.28

1) SUBTOTALS This Period This Page (optional) ▶ 921.70

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only) ▶

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

27020363437

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 12

FOR LINE NUMBER: (check only one) [ ] 9 [X] 10

NAME OF COMMITTEE (in Full)
DANIEL MONGIARDO FOR US SENATE

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

Nature of Debt (Purpose):
Reimb. mileage-event rent-ofc sppls

Mailing Address 204 Wallace Ave

City: Frankfort State: KY ZIP Code: 40601-2149

Outstanding Balance Beginning This Period: 200.06

Transaction ID: D88542

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 200.06

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

Nature of Debt (Purpose):
Salary Backpay - Amount Disputed

Mailing Address 3252 Cornwall Dr

City: Lexington State: KY ZIP Code: 40503-3445

Outstanding Balance Beginning This Period: 15994.32

Transaction ID: D92816

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 15994.32

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kentucky Democratic Party

Nature of Debt (Purpose):
Rent/phones/postage

Mailing Address P.O. Box 40602

City: Frankfort State: KY ZIP Code: 40601

Outstanding Balance Beginning This Period: 6259.44

Transaction ID: D92818

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 6259.44

1) SUBTOTALS This Period This Page (optional) ▶ 22453.82

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only) ▶

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

27020363438

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 13

FOR LINE NUMBER: (check only one) [ ] 9 [X] 10

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

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

Nature of Debt (Purpose):
Oct Rent/phone/copy/postage

Mailing Address P.O. Box 40602

City: Frankfort State: KY ZIP Code: 40601

Outstanding Balance Beginning This Period: 1067.18

Transaction ID: D92956

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 1067.18

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

Nature of Debt (Purpose):
Telephone Service

Mailing Address 700 Ridgeview Dr Ste B

City: Frankfort State: KY ZIP Code: 40601-1429

Outstanding Balance Beginning This Period: 70.00

Transaction ID: D92957

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 70.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Media Library

Nature of Debt (Purpose):
Media Monitoring

Mailing Address 7838 Big Bend Blvd

City: Saint Louis State: MO ZIP Code: 63119-2702

Outstanding Balance Beginning This Period: 256.68

Transaction ID: D91619

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 256.68

1) SUBTOTALS This Period This Page (optional) ▶ 1393.86

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only) ▶

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

27020363439

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 14

FOR LINE NUMBER: (check only one) [ ] 9 [X] 10

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

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

Nature of Debt (Purpose):
Media Advertising/monitor-ing

Mailing Address 7838 Big Bend Blvd

City: Saint Louis State: MO ZIP Code: 63119-2702

Outstanding Balance Beginning This Period: 478.68

Transaction ID: D92216

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 478.68

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

Nature of Debt (Purpose):
Media advertising/monitor-ing

Mailing Address 7838 Big Bend Blvd

City: Saint Louis State: MO ZIP Code: 63119-2702

Outstanding Balance Beginning This Period: 106.00

Transaction ID: D92217

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 106.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Media Library

Nature of Debt (Purpose):
Media advertising/monitor-ing

Mailing Address 7838 Big Bend Blvd

City: Saint Louis State: MO ZIP Code: 63119-2702

Outstanding Balance Beginning This Period: 206.70

Transaction ID: D92218

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 206.70

1) SUBTOTALS This Period This Page (optional) ▶ 791.38

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only) ▶

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

27020363440

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 1 5

FOR LINE NUMBER: (check only one) [ ] 9 [X] 10

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

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

Nature of Debt (Purpose):
Advertising/Media Monitoring

Mailing Address 7838 Big Bend Blvd

City: Saint Louis State: MO ZIP Code: 63119-2702

Outstanding Balance Beginning This Period: 106.00

Transaction ID: D92819

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 106.00

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

Nature of Debt (Purpose):
Media Monitoring/advertising

Mailing Address 7838 Big Bend Blvd

City: Saint Louis State: MO ZIP Code: 63119-2702

Outstanding Balance Beginning This Period: 53.00

Transaction ID: D92958

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 53.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Vincent Mongiardo

Nature of Debt (Purpose):
contract labor for computer consult

Mailing Address 3644 Hartland Parkside Plaza

City: Lexington State: KY ZIP Code: 40515

Outstanding Balance Beginning This Period: 0.03

Transaction ID: D88919

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 0.03

1) SUBTOTALS This Period This Page (optional)	159.03
2) TOTALS This Period (last page this line number only)	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

27020363441

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 1 6

FOR LINE NUMBER: (check only one) [ ] 9 [X] 10

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

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

Nature of Debt (Purpose):
e-mail hosting service

Mailing Address 3644 Hartland Parkside Plaza

City Lexington State KY ZIP Code 40515

Outstanding Balance Beginning This Period: 120.00

Transaction ID: D98321

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 120.00

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

Nature of Debt (Purpose):
Voter Data & Contact Svc
Amt unverified

Mailing Address 3224 Mantilla Dr

City Lexington State KY ZIP Code 40513-1158

Outstanding Balance Beginning This Period: 23184.15

Transaction ID: D92817

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 23184.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Newz Group

Nature of Debt (Purpose):
E-clips/media monitoring

Mailing Address PO Box 873

City Columbia State MO ZIP Code 65205-0873

Outstanding Balance Beginning This Period: 1219.49

Transaction ID: D91623

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 1219.49

1) SUBTOTALS This Period This Page (optional) ▶ 24523.64

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only) ▶

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

27020363442

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 17

FOR LINE NUMBER: (check only one) [ ] 9 [X] 10

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

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

Mailing Address 111 Franklin Square

City: Frankfort State: KY ZIP Code: 40601

Nature of Debt (Purpose): Office Supplies / Envelopes

Outstanding Balance Beginning This Period: 258.90

Transaction ID: D92959

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 258.90

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

Mailing Address 111 Franklin Square

City: Frankfort State: KY ZIP Code: 40601

Nature of Debt (Purpose): Balance fees & finance chgs.

Outstanding Balance Beginning This Period: 52.30

Transaction ID: D92960

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 52.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Office Depot

Mailing Address 111 Franklin Square

City: Frankfort State: KY ZIP Code: 40601

Nature of Debt (Purpose): Balance fees & finance chgs.

Outstanding Balance Beginning This Period: 55.79

Transaction ID: D93255

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 55.79

1) SUBTOTALS This Period This Page (optional)	366.99
2) TOTALS This Period (last page this line number only)	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

27020363443

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 18

FOR LINE NUMBER: (check only one) [ ] 9 [X] 10

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pro-Active Media

Nature of Debt (Purpose):
Television Media

Mailing Address PO Box 5351

City: Louisville State: KY ZIP Code: 40255-0351

Outstanding Balance Beginning This Period: 3810.37

Transaction ID: D88534

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 3810.37

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

Nature of Debt (Purpose):
Postage for endorsement letters

Mailing Address PO Box 491

City: Prestonsburg State: KY ZIP Code: 41653-0491

Outstanding Balance Beginning This Period: 303.76

Transaction ID: D92962

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 303.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Emily J. Taylor

Nature of Debt (Purpose):
Staff Cell Phone

Mailing Address 4030 Tates Creek Rd
Apt 4704

City: Lexington State: KY ZIP Code: 40517-3182

Outstanding Balance Beginning This Period: 279.00

Transaction ID: D92963

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 279.00

1) SUBTOTALS This Period This Page (optional)	4393.13
2) TOTALS This Period (last page this line number only)	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

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SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 19

FOR LINE NUMBER: (check only one) [ ] 9 [X] 10

NAME OF COMMITTEE (In Full)
DANIEL MONGIARDO FOR US SENATE

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

Nature of Debt (Purpose):
Letterhead

Mailing Address PO Box 10

City: La Center State: KY ZIP Code: 42056-0010

Outstanding Balance Beginning This Period: 14412.57

Transaction ID: D88528

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 14412.57

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

Nature of Debt (Purpose):
Express mail service

Mailing Address PO Box 577

City: Carol Stream State: IL ZIP Code: 60132-0001

Outstanding Balance Beginning This Period: 396.96

Transaction ID: D92964

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 396.96

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Z-Tel Communications, Inc.

Nature of Debt (Purpose):
Telephone service/long distance

Mailing Address PO Box 1178

City: Atmore State: AL ZIP Code: 36504-1178

Outstanding Balance Beginning This Period: 881.68

Transaction ID: D92823

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 881.68

1) SUBTOTALS This Period This Page (optional)	15691.21
2) TOTALS This Period (last page this line number only)	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

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SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 20

FOR LINE NUMBER: (check only one)

[ ] 9

[X] 10

NAME OF COMMITTEE (In Full)

DANIEL MONGIARDO FOR US SENATE

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

Z-Tel Communications, Inc.

Nature of Debt (Purpose):

Telephone LD Svc.

Mailing Address PO Box 1178

City	State	ZIP Code
Atmore	AL	36504-1178

Transaction ID: D92965

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
416.00	0.00	0.00	416.00

1) SUBTOTALS This Period This Page (optional)	416.00
2) TOTALS This Period (last page this line number only)	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

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DEBTS AND OBLIGATIONS

Excluding Loans

Schedule(s) for each numbered line) | FOR LINE NUMBER: (check only one) 21 | 9 | 10

NAME OF COMMITTEE (In Full)

DANIEL MONGIARDO FORUS SENATE

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

NGP SOFTWARE, INC.

Nature of Debt (Purpose): Software Rental Fees

Mailing Address: 1101 Vermont Avenue, NW, Ste. 710

City: Washington | State: DC | Zip Code: 20005

Outstanding Balance Beginning This Period:

Amount Incurred This Period: 0.00

Payment This Period: 1400.00

Outstanding Balance at Close of This Period: 1000.00

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

Nature of Debt (Purpose):

Mailing Address

City | State | Zip Code

Outstanding Balance Beginning This Period:

Amount Incurred This Period:

Payment This Period:

Outstanding Balance at Close of This Period:

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

Nature of Debt (Purpose):

Mailing Address

City | State | Zip Code

Outstanding Balance Beginning This Period:

Amount Incurred This Period:

Payment This Period:

Outstanding Balance at Close of This Period:

1) SUBTOTALS This Period This Page (optional) ▶	
2) TOTALS This Period (last page this line number only) ▶	72,110.76
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	534483.01
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	606593.77

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

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Flat Rate ☐ or Weight lbs. ozs.	Military ☐ 2nd Day ☐ 3rd Day	Total Postage & Fees $
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TO: (PLEASE PRINT) PHONE ( )

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SECRETARY

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DHL	_____	☐
AIRBORNE EXPRESS	_____	☐

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Date of Receipt

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Date of Receipt or Postmark

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