

RECEIVED
SECRETARY OF THE SENATE
PUBLIC

15 APR 15 PM 2:34

Blumenthal for Senate

777 Summer St, Ste 103
c/o Cacace Tusch & Santagata
Stamford, CT 06901

April 15, 2015

Deborah Chacona
Assistant Staff Director
Federal Election Commission
999 E Street NW
Washington, DC 20463

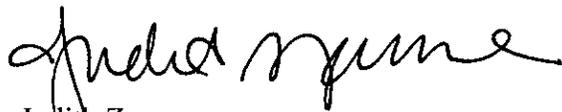
Re: Blumenthal for Senate
FEC ID No. C00473587

Dear Ms. Chacona:

Along with the Committee's April Quarterly report, which will also serve as its Termination report, please find a letter signed by the candidate which forgives the outstanding balance of his personal loan to the Committee.

If you have any questions or need additional material, please contact the undersigned at 202-544-6960.

Sincerely,



Judith Zamore
Treasurer

15020131536

Richard Blumenthal
145 Clapboard Ridge Road
Greenwich, CT 06831

March, 2015

Michael J. Cacace
Chairman,
Blumenthal for Senate
777 Summer Street
Stamford, CT 06901

Re: Loan to Blumenthal for Senate

Dear Mr. Cacace:

As you know, I made a loan to Blumenthal for Senate in 2010. You have recently forwarded to me a check in the amount of \$49,586.70 representing a partial repayment of that loan.

Please accept this letter as a formal forgiveness and cancelation of any remaining balance of the loan owed to me by Blumenthal for Senate.

Sincerely,



Richard Blumenthal

15020131537

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE

15 APR 15 PM 2:34

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. Blumenthal for Senate

ADDRESS (number and street) 777 Summer Street, Ste 103 c/o Cacace Tusch & Santagata Stamford CT 06901

2. FEC IDENTIFICATION NUMBER C00473587 3. IS THIS REPORT NEW OR AMENDED CITY STATE ZIP CODE DISTRICT

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, Termination Report (TER) (b) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (c) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 01 01 2015 through 03 31 2015

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 Judith Zamore

Signature of Treasurer Judith Zamore Date 04 15 2015

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)

15020131538

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Blumenthal for Senate

Report Covering the Period: From: **01 01 2015** To: **03 31 2015**

	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))...	3500.00	519885.99
(b) Total Contribution Refunds (from Line 20(d)) ..	-7150.00	-189.70
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	10650.00	520075.69
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	9.50	507415.20
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	33462.17
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	9.50	473953.03
8. Cash on Hand at Close of Reporting Period (from Line 27)...	0.00	
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) ..	0.00	

For further information contact:

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

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

15020131539

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 12

Write or Type Committee Name

Blumenthal for Senate

Report Covering the Period: From: M M D D Y Y Y Y 01 01 2015 To: M M D D Y Y Y Y 03 31 2015

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	220710.30
(ii) Unitemized	0.00	6508.98
(iii) TOTAL of contributions from individuals ..	0.00	227219.28
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ..	3500.00	292666.71
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3500.00	519885.99
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	23830.70
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..	0.00	33462.17
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	189.51
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	3500.00	577368.37

15020131540

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 12

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	9.50	507415.20
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	3500.00	180163.40
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	49586.70	49586.70
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	49586.70	49586.70
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	-5400.00	1560.30
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	-1750.00	-1750.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	-7150.00	-189.70
21. OTHER DISBURSEMENTS ..	6650.00	8941.20
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	52596.20	745916.80

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	49096.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	3500.00
25. SUBTOTAL (add Line 23 and Line 24)...	52596.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	52596.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	0.00

15020131541

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 12
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)
Blumenthal for Senate

Full Name (Last, First, Middle Initial) American Federation of Government Employees PAC		Date of Receipt MM DD YYYY 02 05 2015
Mailing Address 80 F Street NW		Transaction ID : C6794662
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C C00009936	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. United Technologies Corporation Political Action Committee		Date of Receipt MM DD YYYY 02 09 2015
Mailing Address 1101 Pennsylvania Ave NW Fl 10		Transaction ID : C6798695
City Washington	State DC	Zip Code 20004-2566
FEC ID number of contributing federal political committee. C C00035683	Amount of Each Receipt this Period 2500.00	
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7500.00	

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM DD YYYY
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	3500.00

15020131542

**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 6 OF 12
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenthal for Senate

Full Name (Last, First, Middle Initial) A. Blumenthal for Connecticut		Date of Disbursement MM DD YYYY 02 09 2015
Mailing Address 777 Summer St c/o Cacace Tusch & Santagata		Amount of Each Disbursement this Period 1000.00 Transaction ID : D354230
City Stamford	State CT	
Zip Code 06901-1085	Purpose of Disbursement Transfer 2016 Funds to Blumenthal for Connecticut	Category/ Type
Candidate Name Richard Blumenthal	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CT District: 00	

Full Name (Last, First, Middle Initial) B. Blumenthal for Connecticut		Date of Disbursement MM DD YYYY 02 11 2015
Mailing Address 777 Summer St c/o Cacace Tusch & Santagata		Amount of Each Disbursement this Period 2500.00 Transaction ID : D354242
City Stamford	State CT	
Zip Code 06901-1085	Purpose of Disbursement Transfer 2016 Funds to Blumenthal for Connecticut	Category/ Type
Candidate Name Richard Blumenthal	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CT District: 00	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM DD YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	3500.00

15020131543

**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 7 OF 12
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input checked="" type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 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)
Blumenthal for Senate

Full Name (Last, First, Middle Initial) A. Hon. Richard Blumenthal		Date of Disbursement MM DD YY 02 09 2015
Mailing Address 145 Clapboard Ridge Road		Amount of Each Disbursement this Period 49586.70 Transaction ID : D354353
City Greenwich	State CT	
Purpose of Disbursement Loan Repayment		Category/ Type
Candidate Name Mr. Richard Blumenthal		
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CT	District:	

Full Name (Last, First, Middle Initial) B. Hon. Richard Blumenthal		Date of Disbursement MM DD YY 03 31 2015
Mailing Address 145 Clapboard Ridge Road		Amount of Each Disbursement this Period 200413.30 Transaction ID : D358286 [MEMO ITEM]
City Greenwich	State CT	
Purpose of Disbursement Converting Loan to Contribution		Category/ Type
Candidate Name Mr. Richard Blumenthal		
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CT	District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM DD YY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	49586.70
TOTAL This Period (last page this line number only).....	49586.70

15020131544

**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 8 OF 12			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Blumenthal for Senate

Full Name (Last, First, Middle Initial) A. Mr. Anthony Fitzgerald		Date of Disbursement MM / DD / YYYY 02 / 09 / 2015
Mailing Address 36 North Street		Amount of Each Disbursement this Period -250.00 Transaction ID : D354344
City Watertown	State CT	
Purpose of Disbursement Void 8/30/2010 check		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Mr. Gary D. Jones		Date of Disbursement MM / DD / YYYY 02 / 09 / 2015
Mailing Address 10 High Point Lane		Amount of Each Disbursement this Period -250.00 Transaction ID : D354345
City West Hartford	State CT	
Purpose of Disbursement Void 8/30/2010 check		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Ms. Carolyn Seely Wiener		Date of Disbursement MM / DD / YYYY 02 / 09 / 2015
Mailing Address 66 Vista Dr		Amount of Each Disbursement this Period -2400.00 Transaction ID : D354348
City Greenwich	State CT	
Purpose of Disbursement Void 4/17/2012 check; disgorged		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	-2900.00
TOTAL This Period (last page this line number only).....	

15020131545

**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 9 OF 12			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Blumenthal for Senate

Full Name (Last, First, Middle Initial) A. Mr. Malcolm H. Wiener		Date of Disbursement MM/DD/YYYY 02/09/2015
Mailing Address 66 Vista Dr		Amount of Each Disbursement this Period -2400.00 Transaction ID : D354347
City Greenwich	State CT	
Purpose of Disbursement Void 4/17/2012 check; disgorged		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM/DD/YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM/DD/YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	-2400.00
TOTAL This Period (last page this line number only).....	-5300.00

15020131546

**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 10 OF 12	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blumenthal for Senate

A. CT Derm PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1079

City Litchfield State CT Zip Code 06759

Purpose of Disbursement
Void 7/7/2010 check; disgorged

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify)

State: District:

Date of Disbursement: 02/09/2015

Amount of Each Disbursement this Period: -250.00

Transaction ID : D354342

Category/Type

B. CT Ophthalmologists Medical Eyecare Committee

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 854

City Litchfield State CT Zip Code 06759-0854

Purpose of Disbursement
Void 7/7/2010 check; disgorged

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify)

State: District:

Date of Disbursement: 02/09/2015

Amount of Each Disbursement this Period: -1500.00

Transaction ID : D354343

Category/Type

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... -1750.00

TOTAL This Period (last page this line number only)..... -1750.00

15020131547

**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 11 OF 12

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Blumenthal for Senate

Full Name (Last, First, Middle Initial)

A. United States Treasury

Date of Disbursement: MM/DD/YYYY 02/09/2015

Mailing Address: Internal Revenue Service Center

City: Ogden State: UT Zip Code: 84201

Purpose of Disbursement: Disgorgement

Candidate Name:

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period: 6650.00

Transaction ID: D354351

Category/Type:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement:

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period:

Category/Type:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement:

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period:

Category/Type:

SUBTOTAL of Disbursements This Page (optional)..... 6650.00

TOTAL This Period (last page this line number only)..... 6650.00

15020131548

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full) **Blumenthal for Senate** Transaction ID : L358

LOAN SOURCE Full Name (Last, First, Middle Initial) **Hon. Richard Blumenthal** [PERSONAL FUNDS] Election: 2010
 Primary
 General
 Other (specify) ▼

Mailing Address
 145 Clapboard Ridge Road

City State ZIP Code
 Greenwich CT 06831

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
 500000.00 500000.00 0.00

TERMS Date Incurred Date Due Interest Rate Secured:
 09/30/2010 09/30/2012 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. 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).....	0.00
TOTALS This Period (last page in this line only) ..	0.00

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

15020131549

Hand Delivered

15020131550

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED

4-15-15
Date of Receipt

USPS FIRST CLASS MAIL

Date of Receipt

Postmark

USPS REGISTERED/CERTIFIED

Postmark

USPS PRIORITY MAIL

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

UPS

DHL

AIRBORNE EXPRESS

RECEIVED FROM FEDERAL ELECTION COMMISSION

Date of Receipt

POSTMARK ILLEGIBLE

POSTMARK

FAX

Date of Receipt

OTHER

Date of Receipt or Postmark

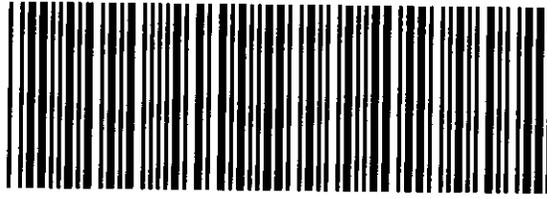
PREPARER

DH

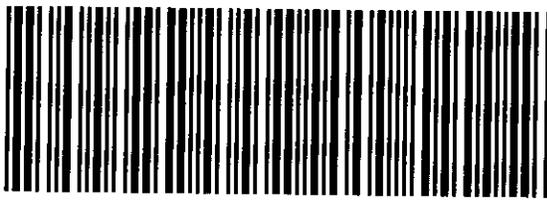
DATE PREPARED

4-15-15

15020131551



SEN PATCH



SEN PATCH

15020131552