

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Mark Greenberg for Congress

ADDRESS (number and street)

53 Peck Rd



Check if different than previously reported. (ACC)

Torrington

CT

06790-6106

2. FEC IDENTIFICATION NUMBER ▼

C

C00493395

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

CT

05

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

M M / D D / Y Y Y Y  
11 / 04 / 2014

in the State of

CT

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
10 / 01 / 2014

through

M M / D D / Y Y Y Y  
10 / 15 / 2014

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 J. Kenneth Nowell

Signature of Treasurer

J. Kenneth Nowell

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
07 / 28 / 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)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Mark Greenberg for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

	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))....	11225.00	11225.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	11225.00	11225.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	321859.59	321859.59
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	321859.59	321859.59
8. Cash on Hand at Close of Reporting Period (from Line 27).....	157539.46	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	1750549.55	

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

PAGE 3 / 84

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Mark Greenberg for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

**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).....**

3200.00

3200.00

**(ii) Unitemized.....**

4275.00

4275.00

**(iii) TOTAL of contributions from individuals ▶**

7475.00

7475.00

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

3750.00

3750.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

11225.00

11225.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

350000.00

350000.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

350000.00

350000.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

361225.00

361225.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 84

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	321859.59	321859.59
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	0.00
(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	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	321859.59	321859.59

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	118174.05
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	361225.00
25. SUBTOTAL (add Line 23 and Line 24).....	479399.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	321859.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	157539.46

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 84

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**Anthony J Amoroso III**

Mailing Address 69 Nonnewaug Road

City

Bethlehem

State

CT

Zip Code

06751-2121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
excavation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2014

Transaction ID : A5E12F77D935C407FB76

Amount of Each Receipt this Period

750.00

campaign contribution

Full Name (Last, First, Middle Initial)

**Jane R Bate**

Mailing Address 454 Riverside Drive

City

Cheshire

State

CT

Zip Code

06410-1813

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Musician

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2014

Transaction ID : A85597AF41F4443BEA90

Amount of Each Receipt this Period

500.00

campaign contribution

Full Name (Last, First, Middle Initial)

**Edward Gadomski**

Mailing Address 34 Goodwin Hill Road

City

Litchfield

State

CT

Zip Code

06759-3805

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : A12095F95696C4F8296A

Amount of Each Receipt this Period

250.00

campaign contribution

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

1500.00

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

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

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

Christine Collins

A.

Mailing Address 24 Westwood Road

City

West Hartford

State

CT

Zip Code

06117-2252

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Shipman &amp; Goodwin, LLP

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : AAB72599EFEC04C5C9C9

Amount of Each Receipt this Period

1000.00

campaign contribution

Full Name (Last, First, Middle Initial)

Alan J Amato

B.

Mailing Address 745 S Brooksvale Road

City

Cheshire

State

CT

Zip Code

06410-3518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PPC World Headquarters

Occupation

Engineer

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : A4A8CD531995F47AAAF7

Amount of Each Receipt this Period

300.00

campaign contribution

Full Name (Last, First, Middle Initial)

Jane R Bate

C.

Mailing Address 454 Riverside Drive

City

Cheshire

State

CT

Zip Code

06410-1813

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Musician

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2014

Transaction ID : A32483DAD470D4C80976

Amount of Each Receipt this Period

400.00

campaign contribution

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

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

1700.00

3200.00

# **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)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Right Principles PAC</b>		<b>Date of Receipt</b> <div> <div>M M / D D / Y Y Y Y</div> <div>10 / 12 / 2014</div> </div>	
<b>Mailing Address</b> 2490 Black Rock Turnpike # 128		<b>Transaction ID : A383D6723FCC44D44A08</b>	
<b>City</b> Fairfield	<b>State</b> CT	<b>Zip Code</b> 06825-2400	
<b>FEC ID number of contributing federal political committee.</b> <div>C C00458067</div>		<b>Amount of Each Receipt this Period</b> <div>250.00</div>	
<b>Name of Employer</b> 		<b>Occupation</b> 	
<b>Receipt For: 2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Election Cycle-to-Date</b> <div>250.00</div>	
<b>B. Full Name (Last, First, Middle Initial)</b> <b>Republican Jewish Coalition</b>		<b>Date of Receipt</b> <div> <div>M M / D D / Y Y Y Y</div> <div>10 / 01 / 2014</div> </div>	
<b>Mailing Address</b> 50 F Street NW Suite 100		<b>Transaction ID : AD10CF5CC51634C99BA0</b>	
<b>City</b> Washington	<b>State</b> DC	<b>Zip Code</b> 20001-1590	
<b>FEC ID number of contributing federal political committee.</b> <div>C C00345132</div>		<b>Amount of Each Receipt this Period</b> <div>2500.00</div>	
<b>Name of Employer</b> 		<b>Occupation</b> 	
<b>Receipt For: 2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Election Cycle-to-Date</b> <div>2500.00</div>	
<b>C. Full Name (Last, First, Middle Initial)</b> <b>FOXX PAC</b>		<b>Date of Receipt</b> <div> <div>M M / D D / Y Y Y Y</div> <div>10 / 02 / 2014</div> </div>	
<b>Mailing Address</b> 22780 Indian Creek Drive Suite 100		<b>Transaction ID : A187EE12C38A54F48918</b>	
<b>City</b> Sterling	<b>State</b> VA	<b>Zip Code</b> 20166-6716	
<b>FEC ID number of contributing federal political committee.</b> <div>C C00493395</div>		<b>Amount of Each Receipt this Period</b> <div>1000.00</div>	
<b>Name of Employer</b> 		<b>Occupation</b> 	
<b>Receipt For: 2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Election Cycle-to-Date</b> <div>1000.00</div>	
<b>SUBTOTAL of Receipts This Page (optional)</b> .....		<div>3750.00</div>	
<b>TOTAL This Period (last page this line number only)</b> .....		<div>3750.00</div>	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mark Greenberg</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>09</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		09		2014
M M	/	D D	/	Y Y Y Y									
10		09		2014									
Mailing Address 184 Fern Ave		<b>Transaction ID : AFABA2000D23841ACB3D</b>											
City Litchfield	State CT	Zip Code 06759-2721											
FEC ID number of contributing federal political committee. <b>C</b> H0CT05150		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>150000.00</td> </tr> </table> loan from Mark Greenberg						150000.00					
				150000.00									
Name of Employer Mark Greenberg Real Estate	Occupation Real Estate Developer												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>150000.00</td> </tr> </table>							150000.00					
				150000.00									

  

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mark Greenberg</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>15</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		15		2014
M M	/	D D	/	Y Y Y Y									
10		15		2014									
Mailing Address 184 Fern Ave		<b>Transaction ID : A9BDE8AB0A22C4E7092B</b>											
City Litchfield	State CT	Zip Code 06759-2721											
FEC ID number of contributing federal political committee. <b>C</b> H0CT05150		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>200000.00</td> </tr> </table> loan from Mark Greenberg						200000.00					
				200000.00									
Name of Employer Mark Greenberg Real Estate	Occupation Real Estate Developer												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>350000.00</td> </tr> </table>							350000.00					
				350000.00									

  

<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address													
City	State	Zip Code											
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> </tr> </table>											
Name of Employer	Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> </tr> </table>												

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="4"></td> <td>350000.00</td> </tr> </table>						350000.00
				350000.00				
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="4"></td> <td>350000.00</td> </tr> </table>						350000.00
				350000.00				



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 84

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. CRD Ventures, LLC d/b/a CR Marketing Group**

Mailing Address 302 Bantam Lake Road

City	State	Zip Code
Morris	CT	06763-1109

Purpose of Disbursement  
field management consultant

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : B6E60354EA7124E70A87

**B. Matthew Sherman**

Mailing Address 7 Perkins Road

City	State	Zip Code
Oxford	CT	06478-1812

Purpose of Disbursement  
field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : BFBFDF3AEB22C41A8909

**c. Lirjeta Klenja**

Mailing Address 33 Hungerford Avenue

City	State	Zip Code
Waterbury	CT	06705-1931

Purpose of Disbursement  
field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : BAB1C0177D2A94C9EADA

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

4000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 84

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. Anne M Dance**

Mailing Address 17 Ellsworth Avenue

City	State	Zip Code
Danbury	CT	06810-5946

Purpose of Disbursement  
field services

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : B1EC82E41B26E44D187F

**B. Mark R Mnich**

Mailing Address 427 Blackstone Village

City	State	Zip Code
Meriden	CT	06450-2409

Purpose of Disbursement  
field services

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : B443C73A4AEB640E9B78

**c. Spencer K Rubin**

Mailing Address 6 Warren Road

City	State	Zip Code
Woodbridge	CT	06525-2333

Purpose of Disbursement  
field staff wages

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

419.75
--------

Transaction ID : B3CE7BD4AB386497CB2D

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

1419.75

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 84

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. Kathleen A Horsky**

Mailing Address 25 Woodlawn Terrace

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
Meriden	CT	06450-4444

Purpose of Disbursement  
reimburse mileage and parking fees

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

88.40
-------

Transaction ID : B69FE7D7D1D86477D9BC

**B. William W Sullivan**

Mailing Address 3 Gillotti Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
New Fairfield	CT	06812-2511

Purpose of Disbursement  
field services

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : B39B9CF6FAE84428394B

**c. Laura A Ferguson**

Mailing Address 26 Chimney Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
Bethel	CT	06801-1225

Purpose of Disbursement  
mileage reimbursement

002

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

231.67
--------

Transaction ID : B2EF13E309471422A82E

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

820.07

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Armando Paul Paolino**

Mailing Address 166 Carriage Drive

City	State	Zip Code
Middlebury	CT	06762-1928

Purpose of Disbursement  
field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : B40401CFD635940BFADC

**B. Jeffrey Giegler**

Mailing Address 10 Old Hayrake Road

City	State	Zip Code
Danbury	CT	06811-3648

Purpose of Disbursement  
reimburse sign supplies

006

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

71.01

Transaction ID : B5A6A6CF1757941449EB

**C. Kathleen A Horsky**

Mailing Address 25 Woodlawn Terrace

City	State	Zip Code
Meriden	CT	06450-4444

Purpose of Disbursement  
office staff wages & reimburse snacks, soda, and garbage bags for office

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

1347.24

Transaction ID : B92107F77397949E3BA8

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

1918.25

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Zachary Strom**

Mailing Address 1 Misty Meadow Road

City	State	Zip Code
Enfield	CT	06082-3940

Purpose of Disbursement  
field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : BAF1979E765524B1D97A

Full Name (Last, First, Middle Initial)

**B. Christina E Sweet**

Mailing Address 1127 Old Colony Road

City	State	Zip Code
Wallingford	CT	06492-1708

Purpose of Disbursement  
field staff wages

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

209.73
--------

Transaction ID : B383027F354D643C2A42

Full Name (Last, First, Middle Initial)

**C. Elissa Ann K Voccola**

Mailing Address 152 Cooper Hill Street

City	State	Zip Code
Manchester	CT	06040-5705

Purpose of Disbursement  
fundraiser wages

003

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

847.78
--------

Transaction ID : BFC1C0B84FC8045FB9CA

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

1557.51

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. Jeffrey Giegler**

Mailing Address 10 Old Hayrake Road

City	State	Zip Code
Danbury	CT	06811-3648

Purpose of Disbursement  
field director wages and reimburse office cleaning supplies

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

1130.28

Transaction ID : B247DB4F385C349708ED

**B. Maeve McHugh**

Mailing Address PO Box 507

City	State	Zip Code
Niantic	CT	06357-0507

Purpose of Disbursement  
field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : BBC29D9D099D9469B97C

**c. Laura A Ferguson**

Mailing Address 26 Chimney Drive

City	State	Zip Code
Bethel	CT	06801-1225

Purpose of Disbursement  
field staff wages

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

422.75

Transaction ID : B631F8F39AE834DFBAE7

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

2053.03

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. Jamestown Associates**Mailing Address 5 Mapleton Road  
Suite 300City State Zip Code  
Princeton NJ 08540-9646Purpose of Disbursement  
TV advertising

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

70000.00
----------

Transaction ID : BF89DC2E29D37453AB03

**B. Capitol Report Media Group, LLC**

Mailing Address 314 Town Street

City State Zip Code  
East Haddam CT 06423-1428Purpose of Disbursement  
Web Media Ad

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

2500.00
---------

Transaction ID : BF4527B595D34402DBFE

**C. Tusk Productions, LLC**

Mailing Address 38 Lakewood Drive

City State Zip Code  
Denville NJ 07834-2818Purpose of Disbursement  
fundraising consultant

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

3500.00
---------

Transaction ID : B3075A5AD9F6E4547A9B

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

76000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. William J Evans**

Mailing Address 325 Celia Drive

City	State	Zip Code
Wolcott	CT	06705-3153

Purpose of Disbursement  
general campaign consulting

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

9000.00
---------

Transaction ID : BC8B292A3CF534484A52

**B. CT GOP - Federal**Mailing Address 31 Pratt Street  
Floor 4

City	State	Zip Code
Hartford	CT	06103-1630

Purpose of Disbursement  
Direct Mail Advertising

004

Candidate Name

**CT GOP - Federal**Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2014

Amount of Each Disbursement this Period

14759.00
----------

Transaction ID : B1BC2C9EEF8FF4BB7BC1

**c. Laura A Ferguson**

Mailing Address 26 Chimney Drive

City	State	Zip Code
Bethel	CT	06801-1225

Purpose of Disbursement  
water for office

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

7.19
------

Transaction ID : BE4941929A6DF42A1B71

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

23766.19



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Spencer K Rubin**

Mailing Address 6 Warren Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

City	State	Zip Code
Woodbridge	CT	06525-2333

Amount of Each Disbursement this Period

419.75
--------

Purpose of Disbursement  
field staff wages

001

Transaction ID : B23A84E48195A4B8E9BF

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Laura A Ferguson**

Mailing Address 26 Chimney Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

City	State	Zip Code
Bethel	CT	06801-1225

Amount of Each Disbursement this Period

422.75
--------

Purpose of Disbursement  
field staff wages

001

Transaction ID : BF88635AB59914055B72

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Jamestown Associates**Mailing Address 5 Mapleton Road  
Suite 300

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2014

City	State	Zip Code
Princeton	NJ	08540-9646

Amount of Each Disbursement this Period

100000.00
-----------

Purpose of Disbursement  
Broadcast Production TV Ad

004

Transaction ID : BE6FC018E238340C28D9

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

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

100842.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. Palace Theater**

Mailing Address 100 E Main Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

City	State	Zip Code
Waterbury	CT	06702-2312

Purpose of Disbursement  
event rental

007

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : BFF1E0C96C33C4464BE0

**B. Maeve McHugh**

Mailing Address PO Box 507

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

City	State	Zip Code
Niantic	CT	06357-0507

Purpose of Disbursement  
consultant field services

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : BDF61B5DEF38A4974B12

**C. Kathleen A Horsky**

Mailing Address 25 Woodlawn Terrace

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

City	State	Zip Code
Meriden	CT	06450-4444

Purpose of Disbursement  
campaign materials

006

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

13.81
-------

Transaction ID : BCB078130AB0144278AE

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

1013.81

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. William W Sullivan**

Mailing Address 3 Gillotti Road

City	State	Zip Code
New Fairfield	CT	06812-2511

Purpose of Disbursement  
consultant field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : B644C79CC3E3A4FFE9C7

**B. United States Treasury**

Mailing Address PO Box 804521

City	State	Zip Code
Cincinnati	OH	45280-4521

Purpose of Disbursement  
payroll taxes 941

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

3406.48

Transaction ID : B51850A6B42464B2E877

**C. Mill Plain Center LP**

Mailing Address 131 West Street

City	State	Zip Code
Danbury	CT	06810-6376

Purpose of Disbursement  
satellite office rent

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

600.00

Transaction ID : BEDC9C610EA104C3C996

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

4506.48

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 84

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Kathleen A Horsky**

Mailing Address 25 Woodlawn Terrace

City	State	Zip Code
Meriden	CT	06450-4444

Purpose of Disbursement  
Flowers/cookies for event

007

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

Amount of Each Disbursement this Period

6	9	.	0	4
---	---	---	---	---

Transaction ID : BC3C69FAA8B2C4F10A05

**B. Kathleen A Horsky**

Mailing Address 25 Woodlawn Terrace

City	State	Zip Code
Meriden	CT	06450-4444

Purpose of Disbursement  
mileage and parking reimbursement

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

Amount of Each Disbursement this Period

1	5	.	5	2
---	---	---	---	---

Transaction ID : B9D4605364A0D4F57871

**c. Jeffrey Giegler**

Mailing Address 10 Old Hayrake Road

City	State	Zip Code
Danbury	CT	06811-3648

Purpose of Disbursement  
mileage reimbursement

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

Amount of Each Disbursement this Period

1	0	.	1	7
---	---	---	---	---

Transaction ID : B3ACC07C70D4841EF9F3

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

325.71

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 84

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Kathleen A Horsky**

Mailing Address 25 Woodlawn Terrace

City	State	Zip Code
Meriden	CT	06450-4444

Purpose of Disbursement  
Office Staff Wages

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 15 / 2014

Amount of Each Disbursement this Period

1312.68
---------

Transaction ID : BA4F25DC5528B4CB1B30

Full Name (Last, First, Middle Initial)

**B. Armando Paul Paolino**

Mailing Address 166 Carriage Drive

City	State	Zip Code
Middlebury	CT	06762-1928

Purpose of Disbursement  
consultant field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 15 / 2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : BA1A2CBCEAA4040158A1

Full Name (Last, First, Middle Initial)

**C. Anne M Dance**

Mailing Address 17 Ellsworth Avenue

City	State	Zip Code
Danbury	CT	06810-5946

Purpose of Disbursement  
consultant field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 15 / 2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : B29DBC099CA0C4299BBB

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

2312.68

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. Andrew Lampart**

Mailing Address 115 Barnhill Road

City	State	Zip Code
Woodbury	CT	06798-2228

Purpose of Disbursement  
consultant field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : BC6869C56E8F64A6F958

**B. Jeffrey Giegler**

Mailing Address 10 Old Hayrake Road

City	State	Zip Code
Danbury	CT	06811-3648

Purpose of Disbursement  
Field Director Wages

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

1002.24

Transaction ID : BF05CAD6A0ECE42C99EF

**c. Andrew B. Lautz**

Mailing Address 29 Highland Avenue

City	State	Zip Code
Bantam	CT	06750-1708

Purpose of Disbursement  
field staff wages

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

461.75

Transaction ID : B89598D3945F84F0BA18

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

1963.99

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. Mark R Mnich**

Mailing Address 427 Blackstone Village

City	State	Zip Code
Meriden	CT	06450-2409

Purpose of Disbursement  
consultant field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : B12EE15CBA1CF431B8C7

**B. Brian Hamel**

Mailing Address 73 Sunset Avenue

City	State	Zip Code
Oakville	CT	06779-2111

Purpose of Disbursement  
political staff wages

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

839.50
--------

Transaction ID : B7BCD7072473CF4F5D99F

**c. Zachary Strom**

Mailing Address 1 Misty Meadow Road

City	State	Zip Code
Enfield	CT	06082-3940

Purpose of Disbursement  
consultant field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : B285CE56B8ECD4A28BF8

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

1839.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 84

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. Matthew Sherman**

Mailing Address 7 Perkins Road

City	State	Zip Code
Oxford	CT	06478-1812

Purpose of Disbursement  
consultant field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 15 / 2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : BC2730598C1314FD58B2

Full Name (Last, First, Middle Initial)

**B. Lirjeta Klenja**

Mailing Address 33 Hungerford Avenue

City	State	Zip Code
Waterbury	CT	06705-1931

Purpose of Disbursement  
consultant field services

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 15 / 2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : BA825603D86F049A186F

Full Name (Last, First, Middle Initial)

**c. Jeffrey Giegler**

Mailing Address 10 Old Hayrake Road

City	State	Zip Code
Danbury	CT	06811-3648

Purpose of Disbursement  
campaign materials for signs

006

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 15 / 2014

Amount of Each Disbursement this Period

153.33
--------

Transaction ID : B8757DFCA3FD64418815

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

1153.33



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 84

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. CT GOP - Federal**Mailing Address 31 Pratt Street  
Floor 4

City Hartford State CT Zip Code 06103-1630

Purpose of Disbursement  
direct mail advertising

Candidate Name

**CT GOP - Federal**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

12243.00
----------

Transaction ID : B5E9391859E114F9FBEA

**B. Watertown Main Street LLC**

Mailing Address PO Box 28

City Watertown State CT Zip Code 06795-0028

Purpose of Disbursement  
Debt Repayment: Rent-office

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention2014

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : BA910E628982F42C3AA1

**c. Dey Smith Steele, LLC**Mailing Address 9 Depot Street  
Floor 2

City Milford State CT Zip Code 06460-3357

Purpose of Disbursement  
Debt Repayment: legal fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

6520.00
---------

Transaction ID : BD11AAFABE0CB4D82AB5

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

19413.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Watertown Main Street LLC**

Mailing Address PO Box 28

City	State	Zip Code
Watertown	CT	06795-0028

Purpose of Disbursement  
Debt Repayment: Rent-office

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention2014

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : B0E63999308C04A12B98

**B. Watertown Main Street LLC**

Mailing Address PO Box 28

City	State	Zip Code
Watertown	CT	06795-0028

Purpose of Disbursement  
Debt Repayment: Rent-office

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention2014

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : B3DF911A1CA474FCCA33

**C. Watertown Main Street LLC**

Mailing Address PO Box 28

City	State	Zip Code
Watertown	CT	06795-0028

Purpose of Disbursement  
Debt Repayment: Rent - office

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

1250.00
---------

Transaction ID : B52DECB9482124D91AA0

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

2550.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Watertown Main Street LLC**

Mailing Address PO Box 28

City	State	Zip Code
Watertown	CT	06795-0028

Purpose of Disbursement  
Debt Repayment: rent headquarters

001

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

1250.00
---------

Transaction ID : B7011E22C6C294C3ABAF

**B. Arrow Printers, Inc.**

Mailing Address 311 Main Street

City	State	Zip Code
Ansonia	CT	06401-2301

Purpose of Disbursement  
Debt Repayment: campaign signs

006

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

478.58
--------

Transaction ID : B429DA571BFD14A3CA34

**C. Red Maverick Media, LLC**Mailing Address 403 N 2nd Street  
Suite 2

City	State	Zip Code
Harrisburg	PA	17101-1377

Purpose of Disbursement  
Debt Repayment: doorhangers

004

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

3975.00
---------

Transaction ID : B3F75B7ED55944365915

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

5703.58

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Watertown Main Street LLC**

Mailing Address PO Box 28

City	State	Zip Code
Watertown	CT	06795-0028

Purpose of Disbursement  
Debt Repayment: Rent-office

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) Convention2014

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : BC81A83989D06488DA6E

Full Name (Last, First, Middle Initial)

**B. VoterTrove, Inc.**

Mailing Address 921 Cavalry Ride Trail

City	State	Zip Code
Austin	TX	78732-2370

Purpose of Disbursement  
Debt Repayment: Get Out Our Vote

007

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

1020.00
---------

Transaction ID : BF430E8DBA19040A1895

Full Name (Last, First, Middle Initial)

**c. John Kleinhans**Mailing Address 60 Old Town Road  
Unit 151

City	State	Zip Code
Vernon	CT	06066-6410

Purpose of Disbursement  
Debt Repayment: Field Management Consultant

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2014

Amount of Each Disbursement this Period

5000.00
---------

Transaction ID : B88540CB7D2D34834B3A

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

6670.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Theroux, Nowell & Stoughton, LLC**

Mailing Address 53 Peck Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

City	State	Zip Code
Torrington	CT	06790-6106

Amount of Each Disbursement this Period

6208.39
---------

Purpose of Disbursement  
Debt Repayment: accounting and software

001

Transaction ID : BB6D3C316F50A481DA18

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Richard Foley**Mailing Address 42 Lake Avenue Extension  
PMB 310

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
Danbury	CT	06811-5279

Amount of Each Disbursement this Period

10000.00
----------

Purpose of Disbursement  
Debt Repayment: termination fee

001

Transaction ID : B6129EBFBEEA54AFC8D5

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Watertown Main Street LLC**

Mailing Address PO Box 28

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

City	State	Zip Code
Watertown	CT	06795-0028

Amount of Each Disbursement this Period

650.00
--------

Purpose of Disbursement  
Debt Repayment: Rent-office

001

Transaction ID : BC1288003C5574236A96

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input checked="" type="checkbox"/> Other (specify) Convention2014

State: District:

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

16858.39

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 84

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. KB Strategic Group**

Mailing Address PO Box 101682

City	State	Zip Code
Arlington	VA	22210-4682

Purpose of Disbursement  
Debt Repayment: fundraising consultant

003

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

725.01
--------

Transaction ID : B378CB0C0F79941A7940

**B. FTIN Strategies**Mailing Address 325 E Jimmie Leeds Road  
Suite 117

City	State	Zip Code
Galloway	NJ	08205-4126

Purpose of Disbursement  
Debt Repayment: Get Our Vote Out

007

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

936.00
--------

Transaction ID : B4CA45E0CBB1848C8AB4

**c. KB Strategic Group**

Mailing Address PO Box 101682

City	State	Zip Code
Arlington	VA	22210-4682

Purpose of Disbursement  
Debt Repayment: fundraising consultant

003

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

1100.00
---------

Transaction ID : B2FFBBCAE8AF545CF9A1

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

2761.01
---------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 84

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. CT GOP - Federal**Mailing Address 31 Pratt Street  
Floor 4

City Hartford State CT Zip Code 06103-1630

Purpose of Disbursement  
Debt Repayment: advertising Direct MailCandidate Name  
CT GOP - FederalOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	01	2014

Amount of Each Disbursement this Period

11436.00
----------

Transaction ID : B1106F5B3F6FB4EE9A36

**B. Watertown Main Street LLC**

Mailing Address PO Box 28

City Watertown State CT Zip Code 06795-0028

Purpose of Disbursement  
Debt Repayment: Rent-office

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) Convention2014

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	15	2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : BC333EB6A24D84DA6A4E

**c. Cooper Communications LLC**

Mailing Address 77 Ripley Hill Road

City Coventry State CT Zip Code 06238-1631

Purpose of Disbursement  
Debt Repayment: Public Relations Consultant

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	07	2014

Amount of Each Disbursement this Period

3721.75
---------

Transaction ID : B529272FAFD5C4C46B5C

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

15807.75
----------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 84

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

Full Name (Last, First, Middle Initial)

**A. Jamestown Associates**Mailing Address 5 Mapleton Road  
Suite 300City State Zip Code  
Princeton NJ 08540-9646Purpose of Disbursement  
Debt Repayment: Broadcast Media Ad

004

Category/  
Type

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	07	2014

Amount of Each Disbursement this Period

6819.00
---------

Transaction ID : B312A879AE8D54F719DD

**B. American Viewpoint, Inc.**Mailing Address 300 N Lee Street  
Suite 400City State Zip Code  
Alexandria VA 22314-2640Purpose of Disbursement  
Debt Repayment: survey

005

Category/  
Type

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	06	2014

Amount of Each Disbursement this Period

11500.00
----------

Transaction ID : B7BC414A1EA6A44DAA6C

**c. Jeffrey Giegler**

Mailing Address 10 Old Hayrake Road

City State Zip Code  
Danbury CT 06811-3648Purpose of Disbursement  
truck rental and fuel reimbursement

002

Category/  
Type

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	02	2014

Amount of Each Disbursement this Period

228.99
--------

Transaction ID : B2CBB0755F9AF415B82F

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

18547.99



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 84

<input checked="" 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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

Full Name (Last, First, Middle Initial)

**A. Jamestown Associates**Mailing Address 5 Mapleton Road  
Suite 300City State Zip Code  
Princeton NJ 08540-9646Purpose of Disbursement  
Debt Repayment: Broadcast Production Ad

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

7585.00
---------

Transaction ID : BA9DEFA27B3004F2AAB9

004

Category/  
Type

Full Name (Last, First, Middle Initial)

**B.**

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

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

Category/  
Type

Full Name (Last, First, Middle Initial)

**C.**

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

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

Category/  
Type**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7585.00

321389.52

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 34 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CFEB2E2425BC4BC5823

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

300000.00

0.00

300000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
08 31 / 2014M M / D D / Y Y Y Y  
NoneY Y Y Y  
None

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)..... ►

300000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 35 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CC474E6A9D9E145438A5

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 06 / 2014

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

10000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 36 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C9CC59E63697E486EB69

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

12500.00

0.00

12500.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
08 / 15 / 2014M M / D D / Y Y Y Y  
NoneY Y Y Y  
None

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)..... ►

12500.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 37 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CCB5478271BD04BCA941

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

17500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

17500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
05 / 03 / 2013

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

17500.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 38 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CD07EFD888A3B4648AE3

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
11 / 26 / 2013

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

5000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 39 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CB60CC071A86C4A02B17

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 27 / 2013

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

15000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 40 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CD4093CB301954FA8B73

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 04 / 2013

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

10000.00

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

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 41 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CF8A2925E3D2E4806B3C

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2012

Mark Greenberg

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

75000.00

0.00

75000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
07 / 25 / 2012M M / D D / Y Y Y Y  
NoneY Y Y Y  
None

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)..... ►

75000.00

**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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 42 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CECBA7AF2579C4725B29

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

235000.00

Cumulative Payment To Date

105000.00

Balance Outstanding at Close of This Period

130000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 30 / 2014

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

130000.00

**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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 43 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CA2C1E440008A41FDB5E

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

M M / D D / Y Y  
06 / 16 / 2014

Date Due

M M / D D / Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

15000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 44 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C0528A3D351754D3BB6C

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

8000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

8000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
11 / 13 / 2013

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

8000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 45 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C71137021C269419383D

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 18 / 2013

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

7500.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 46 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CBA924F3BC0384AB1B4A

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2012

Mark Greenberg

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

95000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

95000.00

**TERMS**

Date Incurred

M M / D D / Y Y  
08 / 13 / 2012

Date Due

M M / D D / Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

95000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 47 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CFABA2000D23841ACB3D

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

150000.00

0.00

150000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
10 09 / 2014M M / D D / Y Y Y Y  
NoneM M / D D / Y Y Y Y  
NoneM M / D D / Y Y Y Y  
None

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)..... ►

150000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CAD835A72DC2043B4B84

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

**TERMS**

Date Incurred

M / D / Y  
12 / 17 / 2013

Date Due

M / D / Y  
None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

2000.00

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

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C608ACCA87AF942D485C

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
11 / 02 / 2013

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

7500.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 50 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C8120BECF32A9412997B

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 16 / 2013

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

10000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 51 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C538F7BD086F14626BF2

Mark Greenberg for Congress

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

Mark Greenberg

**[PERSONAL FUNDS]**

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

M M / D D / Y Y  
06 / 23 / 2014

Date Due

M M / D D / Y Y  
None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

15000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 52 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CEF6B472032C5458B8F5

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100000.00

0.00

100000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
09 30 / 2014M M / D D / Y Y Y Y  
NoneM M / D D / Y Y Y Y  
NoneM M / D D / Y Y Y Y  
None

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)..... ►

100000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C2530A505B6DB44D089F

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
01 / 28 / 2014

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

10000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 54 OF 84

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C9BDE8AB0A22C4E7092B

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

**TERMS**

Date Incurred

M M / D D / Y Y  
10 / 15 / 2014

Date Due

M M / D D / Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

200000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 55 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CFD73008F64174859A74

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2012

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2012

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

500000.00

Cumulative Payment To Date

2600.00

Balance Outstanding at Close of This Period

212400.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
03 / 31 / 2012

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

212400.00

**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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 56 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CD1D81F253F794C4188B

Mark Greenberg for Congress

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

Mark Greenberg

**[PERSONAL FUNDS]**

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 03 / 2014

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

5000.00

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

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 57 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CF9D2816C62954C8CB87

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
02 / 06 / 2014

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

7500.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CA255D27209C6400EB5A

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

8000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

8000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
08 / 06 / 2013

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

8000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 59 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CB3C30926CC3D4713ACF

Mark Greenberg for Congress

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

Mark Greenberg

**[PERSONAL FUNDS]**

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

650000.00

Cumulative Payment To Date

1000.00

Balance Outstanding at Close of This Period

79000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 30 / 2012

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

79000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 60 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C762400101B594EFB9BE

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

97400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

96000.00

**TERMS**

Date Incurred

M M / D D / Y Y  
03 03 / 2014

Date Due

M M / D D / Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

96000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 61 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CC4F9D300B97E418CB4B

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

5500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
12 / 04 / 2013

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

5500.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 62 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CE33093641F8544E79B7

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
08 / 09 / 2014

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

5000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 63 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C71BF6E42B9164E6D9B3

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

12000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

12000.00

**TERMS**

Date Incurred

M 12 / D 11 / Y 2013 Y Y

Date Due

M M / D D / Y None Y Y

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

12000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 64 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C4C5EFE472C5D4BD6A5D

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M M / D D / Y Y  
08 / 19 / 2013

Date Due

M M / D D / Y Y  
None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

10000.00

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

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 65 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CA5403816357B4746BD4

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
05 / 21 / 2014

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

10000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 66 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CD4115B528CF14546B50

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

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 / D D / Y Y  
02 / 11 / 2014

Date Due

M M / D D / Y Y  
None

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 67 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C5567BFAB217D40639A2

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☐ General☒ Other (specify) ▼

Convention2014

Mailing Address

184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

12500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

12500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 04 / 2013

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

12500.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 68 OF 84

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C1EF3F3C5664D40EF8FF

Mark Greenberg for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Mark Greenberg

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
184 Fern Ave

City

State

ZIP Code

Litchfield

CT

06759-2721

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

175000.00

171400.00

3600.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
07 03 / 2014M M / D D / Y Y Y Y  
NoneM M / D D / Y Y Y Y  
NoneM M / D D / Y Y Y Y  
None

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)..... ►

3600.00

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

1667500.00

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 69 OF 84

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**Watertown Main Street LLC**

Nature of Debt (Purpose):

Rent-office

Mailing Address PO Box 28

City State

Zip Code

Watertown

CT

06795-0028

Outstanding Balance Beginning This Period

650.00

Transaction ID : D0403A2DE8CC040A3A8D

Amount Incurred This Period

0.00

Payment This Period

650.00

Outstanding Balance at Close of This Period

0.00

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

**Watertown Main Street LLC**

Nature of Debt (Purpose):

Rent-office

Mailing Address PO Box 28

City State

Zip Code

Watertown

CT

06795-0028

Outstanding Balance Beginning This Period

650.00

Transaction ID : DFBB0A0B2A8E84D1BA0D

Amount Incurred This Period

0.00

Payment This Period

650.00

Outstanding Balance at Close of This Period

0.00

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

**Watertown Main Street LLC**

Nature of Debt (Purpose):

Rent-office

Mailing Address PO Box 28

City

State

Zip Code

Watertown

CT

06795-0028

Outstanding Balance Beginning This Period

650.00

Transaction ID : DE7B18A2B0557454A9D1

Amount Incurred This Period

0.00

Payment This Period

650.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 70 OF 84

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**Watertown Main Street LLC**

Nature of Debt (Purpose):

Rent-office

Mailing Address PO Box 28

City State

Zip Code

Watertown

CT

06795-0028

Outstanding Balance Beginning This Period

650.00

Transaction ID : DD889E6E6AB79404E9DF

Amount Incurred This Period

0.00

Payment This Period

650.00

Outstanding Balance at Close of This Period

0.00

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

**Watertown Main Street LLC**

Nature of Debt (Purpose):

Rent-office

Mailing Address PO Box 28

City State

Zip Code

Watertown

CT

06795-0028

Outstanding Balance Beginning This Period

650.00

Transaction ID : D789E9125239943F3B75

Amount Incurred This Period

0.00

Payment This Period

650.00

Outstanding Balance at Close of This Period

0.00

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

**Watertown Main Street LLC**

Nature of Debt (Purpose):

Rent-office

Mailing Address PO Box 28

City

State

Zip Code

Watertown

CT

06795-0028

Outstanding Balance Beginning This Period

650.00

Transaction ID : D3839E71E0F0643FC87B

Amount Incurred This Period

0.00

Payment This Period

650.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 71 OF 84

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**United States Treasury**

Nature of Debt (Purpose):

Federal Unemployment Tax 940 2014

Mailing Address PO Box 804521

City State

Zip Code

Cincinnati

OH

45280-4521

Outstanding Balance Beginning This Period

60.00

Transaction ID : D216EAF7E2AD24A66974

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.00

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

**United States Treasury**

Nature of Debt (Purpose):

FUTA tax liability for April, 2014

Mailing Address PO Box 804521

City State

Zip Code

Cincinnati

OH

45280-4521

Outstanding Balance Beginning This Period

9.00

Transaction ID : D8B7CBE00F350451FBB1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9.00

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

**United States Treasury**

Nature of Debt (Purpose):

Federal Unemployment Tax Liability May/June 2014

Mailing Address PO Box 804521

City

State

Zip Code

Cincinnati

OH

45280-4521

Outstanding Balance Beginning This Period

83.82

Transaction ID : D24B60991837B413BB59

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

83.82

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

152.82

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 72 OF 84

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**Dey Smith Steele, LLC**Nature of Debt (Purpose):  
legal feesMailing Address 9 Depot Street  
Floor 2City State Zip Code  
Milford CT 06460-3357

Outstanding Balance Beginning This Period

6520.00

Transaction ID : DEBA85F9D0CD24DC696C

Amount Incurred This Period

0.00

Payment This Period

6520.00

Outstanding Balance at Close of This Period

0.00

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

**Watertown Main Street LLC**Nature of Debt (Purpose):  
rent headquarters

Mailing Address PO Box 28

City State Zip Code  
Watertown CT 06795-0028

Outstanding Balance Beginning This Period

1250.00

Transaction ID : DEA01CDFED8D44C4DB5E

Amount Incurred This Period

0.00

Payment This Period

1250.00

Outstanding Balance at Close of This Period

0.00

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

**Theroux, Nowell & Stoughton, LLC**Nature of Debt (Purpose):  
accounting and software

Mailing Address 53 Peck Road

City State Zip Code  
Torrington CT 06790-6106

Outstanding Balance Beginning This Period

6208.39

Transaction ID : D2C563FB26CBE4F94B55

Amount Incurred This Period

0.00

Payment This Period

6208.39

Outstanding Balance at Close of This Period

0.00

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 2) **TOTALS** This Period (last page this line number only) ..... ▶
- 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 only) ▶

0.00



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 73 OF 84

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**Cooper Communications LLC**

Nature of Debt (Purpose):

Public Relations Consultant

Mailing Address 77 Ripley Hill Road

City State

Zip Code

Coventry

CT

06238-1631

Outstanding Balance Beginning This Period

3721.75

Transaction ID : D8C6D71179372409781D

Amount Incurred This Period

0.00

Payment This Period

3721.75

Outstanding Balance at Close of This Period

0.00

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

**VoterTrove, Inc.**

Nature of Debt (Purpose):

Get Out Our Vote

Mailing Address 921 Cavalry Ride Trail

City State

Zip Code

Austin

TX

78732-2370

Outstanding Balance Beginning This Period

1020.00

Transaction ID : DA5987C62516F43228C2

Amount Incurred This Period

0.00

Payment This Period

1020.00

Outstanding Balance at Close of This Period

0.00

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

**David Derwin**

Nature of Debt (Purpose):

production costs TV ad

Mailing Address 1313 Grand Street  
Apt. 205

City

State

Zip Code

Hoboken

NJ

07030-2252

Outstanding Balance Beginning This Period

1500.00

Transaction ID : DB29C8BFA63B34E22B35

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶2) **TOTALS** This Period (last page this line number only) ..... ▶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 only) ▶

1500.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**Dey Smith Steele, LLC**Nature of Debt (Purpose):  
legal feesMailing Address 9 Depot Street  
Floor 2City State Zip Code  
Milford CT 06460-3357

Outstanding Balance Beginning This Period

13325.00

Transaction ID : DD5AB8843219C4795900

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13325.00

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

**Watertown Main Street LLC**Nature of Debt (Purpose):  
Rent - office

Mailing Address PO Box 28

City State Zip Code  
Watertown CT 06795-0028

Outstanding Balance Beginning This Period

1250.00

Transaction ID : D370C72000F8E42E5A27

Amount Incurred This Period

0.00

Payment This Period

1250.00

Outstanding Balance at Close of This Period

0.00

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

**FTIN Strategies**Nature of Debt (Purpose):  
Get Our Vote OutMailing Address 325 E Jimmie Leeds Road  
Suite 117City State Zip Code  
Galloway NJ 08205-4126

Outstanding Balance Beginning This Period

936.00

Transaction ID : D2C138436F3EB47438B2

Amount Incurred This Period

0.00

Payment This Period

936.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

13325.00

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 75 OF 84

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**American Viewpoint, Inc.**Nature of Debt (Purpose):  
surveyMailing Address 300 N Lee Street  
Suite 400City State Zip Code  
Alexandria VA 22314-2640

Outstanding Balance Beginning This Period

11500.00

Transaction ID : D2EE9FEF0C7D743D4899

Amount Incurred This Period

0.00

Payment This Period

11500.00

Outstanding Balance at Close of This Period

0.00

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

**Theroux, Nowell & Stoughton, LLC**Nature of Debt (Purpose):  
accounting and software

Mailing Address 53 Peck Road

City State Zip Code  
Torrington CT 06790-6106

Outstanding Balance Beginning This Period

6654.25

Transaction ID : DF899CA4A61054B5598E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6654.25

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

**Richard Foley**Nature of Debt (Purpose):  
termination feeMailing Address 42 Lake Avenue Extension  
PMB 310City State Zip Code  
Danbury CT 06811-5279

Outstanding Balance Beginning This Period

10000.00

Transaction ID : D3CB38B73794B4D51857

Amount Incurred This Period

0.00

Payment This Period

10000.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

6654.25

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 76 OF 84

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**FTIN Strategies**

Nature of Debt (Purpose):

Get Our Vote Out

Mailing Address 325 E Jimmie Leeds Road  
Suite 117City State Zip Code  
Galloway NJ 08205-4126

Outstanding Balance Beginning This Period

1257.17

Transaction ID : D61010B519152401AB45

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1257.17

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

**Cooper Communications LLC**

Nature of Debt (Purpose):

Public relations consultant

Mailing Address 77 Ripley Hill Road

City State Zip Code  
Coventry CT 06238-1631

Outstanding Balance Beginning This Period

3721.75

Transaction ID : D56D8FA16F7C34264A41

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3721.75

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

**Arrow Printers, Inc.**

Nature of Debt (Purpose):

campaign signs

Mailing Address 311 Main Street

City State Zip Code  
Ansonia CT 06401-2301

Outstanding Balance Beginning This Period

478.58

Transaction ID : D882833884A3B422DB8C

Amount Incurred This Period

0.00

Payment This Period

478.58

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

4978.92

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 77 OF 84

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**Jamestown Associates**

Nature of Debt (Purpose):

Broadcast Media Ad

Mailing Address 5 Mapleton Road  
Suite 300City State Zip Code  
Princeton NJ 08540-9646

Outstanding Balance Beginning This Period

6819.00

Transaction ID : D8E75E36FC57C495989E

Amount Incurred This Period

0.00

Payment This Period

6819.00

Outstanding Balance at Close of This Period

0.00

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

**Jamestown Associates**

Nature of Debt (Purpose):

Broadcast Production Ad

Mailing Address 5 Mapleton Road  
Suite 300City State Zip Code  
Princeton NJ 08540-9646

Outstanding Balance Beginning This Period

7585.00

Transaction ID : D62D998A809054CD5955

Amount Incurred This Period

0.00

Payment This Period

7585.00

Outstanding Balance at Close of This Period

0.00

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

**Verbatim Services**

Nature of Debt (Purpose):

printed invitations and envelopes with logo

Mailing Address PO Box 794

City State Zip Code  
West Caldwell NJ 07007-0794

Outstanding Balance Beginning This Period

797.15

Transaction ID : D607ABBB8338F4FBF9B8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

797.15

1) **SUBTOTALS** This Period This Page (optional) ..... ▶2) **TOTALS** This Period (last page this line number only) ..... ▶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 only) ▶

797.15

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 78 OF 84

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**KB Strategic Group**Nature of Debt (Purpose):  
fundraising consultant

Mailing Address PO Box 101682

City State

Zip Code

Arlington

VA

22210-4682

Outstanding Balance Beginning This Period

725.01

Transaction ID : DB097657BE20843B2B26

Amount Incurred This Period

0.00

Payment This Period

725.01

Outstanding Balance at Close of This Period

0.00

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

**Darter Specialties, Inc.**Nature of Debt (Purpose):  
printed campaign shirts

Mailing Address PO Box 188

City State

Zip Code

Cheshire

CT

06410-0188

Outstanding Balance Beginning This Period

878.45

Transaction ID : D8CB93EA1DC3A41DD892

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

878.45

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

**Ian Marshall's Golf Shop**Nature of Debt (Purpose):  
Outing Prize Vouchers DT sleeves and tee packs

Mailing Address 246 Guernseytown Road

City

State

Zip Code

Watertown

CT

06795-1819

Outstanding Balance Beginning This Period

886.00

Transaction ID : D2D7416C09F2C4DC1992

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

886.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

1764.45

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**Watertown Golf Club**Nature of Debt (Purpose):  
golf tournament expenses

Mailing Address 246 Guernseytown Road

City State

Zip Code

Watertown

CT

06795-1819

Outstanding Balance Beginning This Period

6804.05

Transaction ID : DB8C11DA6942C472A944

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6804.05

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

**American Copy Service Center, Inc.**Nature of Debt (Purpose):  
copier costs

Mailing Address 2095 S Main Street

City State

Zip Code

Waterbury

CT

06706-2029

Outstanding Balance Beginning This Period

119.03

Transaction ID : DA6288ED38CC84FD9977

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

119.03

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

**Dey Smith Steele, LLC**Nature of Debt (Purpose):  
legal feesMailing Address 9 Depot Street  
Floor 2

City

State

Zip Code

Milford

CT

06460-3357

Outstanding Balance Beginning This Period

14543.75

Transaction ID : DB6430B895C0F48A7A1D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14543.75

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

21466.83

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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numbered line)

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☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**CT GOP - Federal**Nature of Debt (Purpose):  
advertising Direct MailMailing Address 31 Pratt Street  
Floor 4City State Zip Code  
Hartford CT 06103-1630

Outstanding Balance Beginning This Period

11436.00

Transaction ID : D5DDBF02CF7F14C429EC

Amount Incurred This Period

0.00

Payment This Period

11436.00

Outstanding Balance at Close of This Period

0.00

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

**AT&T**Nature of Debt (Purpose):  
u-verse internet service

Mailing Address PO Box 8110

City State Zip Code  
Aurora IL 60507-8110

Outstanding Balance Beginning This Period

0.00

Transaction ID : D319CD540E132467190B

Amount Incurred This Period

25.83

Payment This Period

0.00

Outstanding Balance at Close of This Period

25.83

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

**FTIN Strategies**Nature of Debt (Purpose):  
Get Out Our VoteMailing Address 325 E Jimmie Leeds Road  
Suite 117City State Zip Code  
Galloway NJ 08205-4126

Outstanding Balance Beginning This Period

0.00

Transaction ID : DBDD4A037EF8443C2953

Amount Incurred This Period

1169.85

Payment This Period

0.00

Outstanding Balance at Close of This Period

1169.85

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

1195.68

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



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**Watertown Main Street LLC**Nature of Debt (Purpose):  
rent headquarters

Mailing Address PO Box 28

City State

Zip Code

Watertown

CT

06795-0028

Outstanding Balance Beginning This Period

0.00

Transaction ID : D366E903FA4464DD7A4D

Amount Incurred This Period

1250.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1250.00

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

**Red Maverick Media, LLC**Nature of Debt (Purpose):  
doorhangersMailing Address 403 N 2nd Street  
Suite 2

City State

Zip Code

Harrisburg

PA

17101-1377

Outstanding Balance Beginning This Period

0.00

Transaction ID : D4E6D2E7A0A4044C5B16

Amount Incurred This Period

3975.00

Payment This Period

3975.00

Outstanding Balance at Close of This Period

0.00

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

**Theroux, Nowell & Stoughton, LLC**Nature of Debt (Purpose):  
accounting and software

Mailing Address 53 Peck Road

City

State

Zip Code

Torrington

CT

06790-6106

Outstanding Balance Beginning This Period

0.00

Transaction ID : D6507C36E07BA4CDB916

Amount Incurred This Period

7280.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

7280.50

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

8530.50

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**KB Strategic Group**Nature of Debt (Purpose):  
fundraising consultant

Mailing Address PO Box 101682

City State

Zip Code

Arlington

VA

22210-4682

Outstanding Balance Beginning This Period

0.00

Transaction ID : D0211C5BB14C044A6889

Amount Incurred This Period

1100.00

Payment This Period

1100.00

Outstanding Balance at Close of This Period

0.00

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

**Cablevision of Litchfield**Nature of Debt (Purpose):  
telephone headquarters

Mailing Address PO Box 9256

City State

Zip Code

Chelsea

MA

02150-9256

Outstanding Balance Beginning This Period

0.00

Transaction ID : D7418E7196DE643869DB

Amount Incurred This Period

183.48

Payment This Period

0.00

Outstanding Balance at Close of This Period

183.48

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

**Jamestown Associates**Nature of Debt (Purpose):  
Production TV AdMailing Address 5 Mapleton Road  
Suite 300

City

State

Zip Code

Princeton

NJ

08540-9646

Outstanding Balance Beginning This Period

0.00

Transaction ID : DCC463C2437A24750BAF

Amount Incurred This Period

15699.90

Payment This Period

0.00

Outstanding Balance at Close of This Period

15883.38

1) **SUBTOTALS** This Period This Page (optional) ..... ▶2) **TOTALS** This Period (last page this line number only) ..... ▶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 only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**Darter Specialties, Inc.**Nature of Debt (Purpose):  
signs

Mailing Address PO Box 188

City State

Zip Code

Cheshire

CT

06410-0188

Outstanding Balance Beginning This Period

0.00

Transaction ID : D9799CE035BD840BC8F3

Amount Incurred This Period

143.57

Payment This Period

0.00

Outstanding Balance at Close of This Period

143.57

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

**John Kleinhans**Nature of Debt (Purpose):  
Field Management ConsultantMailing Address 60 Old Town Road  
Unit 151

City State

Zip Code

Vernon

CT

06066-6410

Outstanding Balance Beginning This Period

0.00

Transaction ID : DF16370D04CF544669F8

Amount Incurred This Period

5000.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

0.00

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

**William J Evans**Nature of Debt (Purpose):  
fence posts and cable ties

Mailing Address 325 Celia Drive

City

State

Zip Code

Wolcott

CT

06705-3153

Outstanding Balance Beginning This Period

0.00

Transaction ID : DE352092E4CD24B50A3F

Amount Incurred This Period

237.65

Payment This Period

0.00

Outstanding Balance at Close of This Period

237.65

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

381.22

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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☒ 10

NAME OF COMMITTEE (In Full)

**Mark Greenberg for Congress**

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

**William J Evans**

Nature of Debt (Purpose):

postage, permanent markers, badges, cream  
for office

Mailing Address 325 Celia Drive

City State

Zip Code

Wolcott

CT

06705-3153

Outstanding Balance Beginning This Period

0.00

Transaction ID : D596FE4B656C945F99EC

Amount Incurred This Period

550.55

Payment This Period

0.00

Outstanding Balance at Close of This Period

550.55

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

**William J Evans**

Nature of Debt (Purpose):

Parking, fuel for truck, meals, and lodging

Mailing Address 325 Celia Drive

City State

Zip Code

Wolcott

CT

06705-3153

Outstanding Balance Beginning This Period

0.00

Transaction ID : DFFC81E238F8B40769AA

Amount Incurred This Period

2147.05

Payment This Period

0.00

Outstanding Balance at Close of This Period

2147.05

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

**Cooper Communications LLC**

Nature of Debt (Purpose):

Public relations consultant

Mailing Address 77 Ripley Hill Road

City

State

Zip Code

Coventry

CT

06238-1631

Outstanding Balance Beginning This Period

0.00

Transaction ID : D5851A390930444CA900

Amount Incurred This Period

3721.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

3721.75

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

6419.35

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

83049.55

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

1667500.00

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

1750549.55