

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

STEVE OBSITNIK FOR CONGRESS, INC

ADDRESS (number and street)

8 Imperial Landing

Check if different than previously reported. (ACC)

Westport

CT

06880

2. FEC IDENTIFICATION NUMBER ▼

C C00504357

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CT

04

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

in the State of

(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 2012

through

M M /

D D /

Y Y Y Y 2012

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 BRADLEY T. CRATE

Signature of Treasurer BRADLEY T. CRATE

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2013

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

Write or Type Committee Name

STEVE OBSITNIK FOR CONGRESS, INC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	2275.77
(b) Total Contribution Refunds (from Line 20(d))	1283.54	2809.31
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-1283.54	-533.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	22952.17	42429.48
(b) Total Offsets to Operating Expenditures (from Line 14).....	495.67	495.67
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	22456.50	41933.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6213.04	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	133793.06	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

STEVE OBSITNIK FOR CONGRESS, INC

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	2275.77
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	2275.77
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	2275.77
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	495.67	495.67
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)..... ▶	495.67	2771.44

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	22952.17	42429.48
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	200000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	200000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1283.54	2809.31
(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)).....	1283.54	2809.31
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	24235.71	245238.79

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	29953.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	495.67
25. SUBTOTAL (add Line 23 and Line 24).....	30448.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	24235.71
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6213.04

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 20
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STEVE OBSITNIK FOR CONGRESS, INC

A. Full Name (Last, First, Middle Initial)
ON MESSAGE INC.

Mailing Address 2130 PRIEST BRIDGE DR.
#11

City CROFTON State MD Zip Code 21114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
495.67

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2012

Transaction ID : SA14.9448

Amount of Each Receipt this Period
495.67

VENDOR REFUND: PLACED MEDIA

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

495.67

495.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STEVE OBSITNIK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. DAVID BERMAN		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012
Mailing Address 84 SILVER SPRING ROAD		Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.9460
City RIDGEFIELD	State CT	
Zip Code 06877	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANDREW CLARK		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012
Mailing Address PO BOX 730		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.9456
City NORWALK	State CT	
Zip Code 06850	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CONNECTICUT LIGHT AND POWER		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2012
Mailing Address PO BOX 150493		Amount of Each Disbursement this Period 226.26 Transaction ID : SB17.9466
City HARTFORD	State CT	
Zip Code 06115	Purpose of Disbursement UTILITIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2176.26
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
STEVE OBSITNIK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. GARY J DEFILIPPO			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012	
Mailing Address PO BOX 730			Amount of Each Disbursement this Period 1250.00	
City NORWALK	State CT	Zip Code 06850	Transaction ID : SB17.9462	
Purpose of Disbursement PAYROLL		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) B. EPAY BUSINESS SOLUTIONS, INC.			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012	
Mailing Address 19 MIDSTATE DRIVE STE 120			Amount of Each Disbursement this Period 1132.15	
City AUBURN	State MA	Zip Code 01501	Transaction ID : SB17.9467	
Purpose of Disbursement PAYROLL SERVICES/TAXES		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) C. FIDDLERS GREEN			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012	
Mailing Address 280 SHIPPAN AVE			Amount of Each Disbursement this Period 1500.00	
City STAMFORD	State CT	Zip Code 06902	Transaction ID : SB17.9501	
Purpose of Disbursement FACILITY RENTAL/CATERING SERVICES		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3882.15
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STEVE OBSITNIK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. SEAN HUTSON		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012
Mailing Address P.O. BOX 268		Amount of Each Disbursement this Period 1050.00 Transaction ID : SB17.9458
City WESTFIELD CENTER	State OH Zip Code 44251	
Purpose of Disbursement PAYROLL	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. RONALD MILLER		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012
Mailing Address PO BOX 730		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.9457
City NORWALK	State CT Zip Code 06850	
Purpose of Disbursement PAYROLL	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NORWALK INN		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 99 EAST AVE		Amount of Each Disbursement this Period 2690.50 Transaction ID : SB17.9544
City NORWALK	State CT Zip Code 06855	
Purpose of Disbursement FACILITY RENTAL/CATERING SERVICES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5740.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STEVE OBSITNIK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. PATTON BOGGS LLP		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2012
Mailing Address 2550 M STREET, NW		Amount of Each Disbursement this Period 1316.25 Transaction ID : SB17.9469
City WASHINGTON State DC Zip Code 20037	Purpose of Disbursement LEGAL CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. JOHN PUSKAR JR.		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 14 HAVERHILL PLACE		Amount of Each Disbursement this Period 408.53 Transaction ID : SB17.9453
City TRUMBULL State CT Zip Code 06611	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. JOHN E PUSKAR		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012
Mailing Address 14 HAVERHILL PLACE		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.9455
City TRUMBULL State CT Zip Code 06611	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4224.78
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STEVE OBSITNIK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. GARY RAYTAR		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 8 SUNNYRIDGE PKWY		Amount of Each Disbursement this Period 348.25 Transaction ID : SB17.9450
City TRUMBULL	State CT	
Zip Code 06611	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. RIZZUTOS WOOD FIRED KITCHEN AND BAR		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 540 RIVERSIDE AVE		Amount of Each Disbursement this Period 265.88 Transaction ID : SB17.9527
City WESTPORT	State CT	
Zip Code 06880	Purpose of Disbursement FACILITY RENTAL/CATERING SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. STEVEN ROSENBAUM		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012
Mailing Address PO BOX 730		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.9459
City NORWALK	State CT	
Zip Code 06850	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1864.13
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
STEVE OBSITNIK FOR CONGRESS, INC

A. STAPLES

Full Name (Last, First, Middle Initial)
Mailing Address 420 WESTPORT AVE

City NORWALK State CT Zip Code 06851

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2012

Amount of Each Disbursement this Period: 168.00

Transaction ID : SB17.9534

B. STAPLES

Full Name (Last, First, Middle Initial)
Mailing Address 420 WESTPORT AVE

City NORWALK State CT Zip Code 06851

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2012

Amount of Each Disbursement this Period: 246.59

Transaction ID : SB17.9535

C. CADY TAYLOR

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 730

City NORWALK State CT Zip Code 06850

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 30 / 2012

Amount of Each Disbursement this Period: 1125.00

Transaction ID : SB17.9454

SUBTOTAL of Disbursements This Page (optional) 1539.59

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STEVE OBSITNIK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. US POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 16 WASHINGTON ST		Amount of Each Disbursement this Period 320.00 Transaction ID : SB17.9548
City NORWALK State CT Zip Code 06855	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 16 WASHINGTON ST		Amount of Each Disbursement this Period 256.00 Transaction ID : SB17.9549
City NORWALK State CT Zip Code 06855	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. US POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 16 WASHINGTON ST		Amount of Each Disbursement this Period 320.00 Transaction ID : SB17.9550
City NORWALK State CT Zip Code 06855	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	896.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STEVE OBSITNIK FOR CONGRESS, INC

A. US POST OFFICE

Full Name (Last, First, Middle Initial)
Mailing Address 16 WASHINGTON ST

City NORWALK State CT Zip Code 06855

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2012

Amount of Each Disbursement this Period: 320.00

Transaction ID : SB17.9551

B. JEFFREY WRIGHT

Full Name (Last, First, Middle Initial)
Mailing Address 1925 HUNTINGTON TPKE

City TRUMBULL State CT Zip Code 06611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 11 / 2012

Amount of Each Disbursement this Period: 325.94

Transaction ID : SB17.9452

C.

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

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) 645.94

TOTAL This Period (last page this line number only) 20969.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 20			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
STEVE OBSITNIK FOR CONGRESS, INC

Full Name (Last, First, Middle Initial) A. JAMES P. O'SHAUGHNESSY			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012		
Mailing Address 4 JENNIFER LANE			Amount of Each Disbursement this Period 1283.54		
City COB COB	State CT	Zip Code 06807	Transaction ID : SB20A.9449		
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

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

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

SUBTOTAL of Disbursements This Page (optional).....	1283.54
TOTAL This Period (last page this line number only).....	1283.54

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **STEVE OBSITNIK FOR CONGRESS, INC** Transaction ID : **SC/10.4602**

LOAN SOURCE Full Name (Last, First, Middle Initial) STEPHEN OBSITNIK	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Mailing Address 8 IMPERIAL LANDING		

City	State	ZIP Code
WESTPORT	CT	06880

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1200.00	0.00	1200.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
10 / 05 / 2011	1/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	▶	1200.00
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

NAME OF COMMITTEE (In Full) **STEVE OBSITNIK FOR CONGRESS, INC** Transaction ID : **SC/10.4605**

LOAN SOURCE Full Name (Last, First, Middle Initial) STEPHEN OBSITNIK	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Mailing Address 8 IMPERIAL LANDING		

City	State	ZIP Code
WESTPORT	CT	06880

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1250.00	0.00	1250.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 10 / D 05 / Y 2011	M M / D D / Y 1/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	1250.00
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

NAME OF COMMITTEE (In Full) **STEVE OBSITNIK FOR CONGRESS, INC** Transaction ID : **SC/10.4608**

LOAN SOURCE Full Name (Last, First, Middle Initial) STEPHEN OBSITNIK	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Mailing Address 8 IMPERIAL LANDING		

City	State	ZIP Code
WESTPORT	CT	06880

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
531.75	0.00	531.75

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
10 / 06 / 2011	1/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	▶	531.75
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

NAME OF COMMITTEE (In Full) **STEVE OBSITNIK FOR CONGRESS, INC** Transaction ID : **SC/10.4607**

LOAN SOURCE Full Name (Last, First, Middle Initial) STEPHEN OBSITNIK	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Mailing Address 8 IMPERIAL LANDING		

City	State	ZIP Code
WESTPORT	CT	06880

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
713.61	0.00	713.61

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
11 / 09 / 2011	1/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	713.61
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

NAME OF COMMITTEE (In Full) **STEVE OBSITNIK FOR CONGRESS, INC** Transaction ID : **SC/10.4606**

LOAN SOURCE Full Name (Last, First, Middle Initial) STEPHEN OBSITNIK	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Mailing Address 8 IMPERIAL LANDING		

City	State	ZIP Code
WESTPORT	CT	06880

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
97.70	0.00	97.70

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 11 / D 17 / Y 2011	M M / D D / Y 1/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	97.70
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

NAME OF COMMITTEE (In Full) **STEVE OBSITNIK FOR CONGRESS, INC** Transaction ID : **SC/10.5317**

LOAN SOURCE Full Name (Last, First, Middle Initial) STEPHEN OBSITNIK	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention
Mailing Address 8 IMPERIAL LANDING		

City	State	ZIP Code
WESTPORT	CT	06880

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
130000.00	0.00	130000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 31 / Y 2012	M M / D D / Y 1/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	133793.06

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