



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**DANIEL BOTELHO FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	3535.00
(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)).....	0.00	3535.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	0.00	11880.67
(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)).....	0.00	11880.67
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	0.00	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	8377.42	

**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

**DANIEL BOTELHO FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	2260.00
(ii) Unitemized .....	0.00	1275.00
(iii) TOTAL of contributions from individuals ▶	0.00	3535.00
(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	3535.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	8003.35
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	8003.35
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	0.00	11538.35

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	0.00	11880.67
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	205.09	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	205.09	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) ▶	205.09	11880.67

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	205.09
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	205.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	205.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

**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 5 OF 15	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**DANIEL BOTELHO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Daniel S Botelho</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 126 Buffinton St		Amount of Each Disbursement this Period 83.92 <b>Transaction ID : SB19A.4482</b>
City FALL RIVER State MA Zip Code 02721	Purpose of Disbursement Loan Payment 009 Category/Type	
Candidate Name <b>DANIEL BOTELHO FOR CONGRESS</b>		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 09		

Full Name (Last, First, Middle Initial) <b>B. Daniel S Botelho</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 126 Buffinton St		Amount of Each Disbursement this Period 121.17 <b>Transaction ID : SB19A.4486</b>
City FALL RIVER State MA Zip Code 02721	Purpose of Disbursement Loan Repayment 009 Category/Type	
Candidate Name <b>Daniel S Botelho</b>		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 09		

Full Name (Last, First, Middle Initial) <b>C.</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		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	205.09
<b>TOTAL</b> This Period (last page this line number only).....	205.09

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

NAME OF COMMITTEE (In Full) **DANIEL BOTELHO FOR CONGRESS** Transaction ID : **SC/10.4279**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Daniel S Botelho</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 126 Buffinton St	

City	State	ZIP Code
FALL RIVER	MA	02721

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
83.92	83.92	0.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
02 / 28 / 2012	12/31/2013	14.99 % (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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="0.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input type="text"/>

**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) **DANIEL BOTELHO FOR CONGRESS** Transaction ID : **SC/10.4281**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Daniel S Botelho</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 126 Buffinton St	

City	State	ZIP Code
FALL RIVER	MA	02721

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
538.24	121.17	417.07

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 30 / Y 2012	M M / D D / Y 12/31/2013	14.99 % (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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	417.07
<b>TOTALS</b> 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) **DANIEL BOTELHO FOR CONGRESS** Transaction ID : **SC/10.4282**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Daniel S Botelho</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 126 Buffinton St	

City	State	ZIP Code
FALL RIVER	MA	02721

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
612.03	0.00	612.03

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
04 / 30 / 2012	12/31/2013	14.99 % (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:

<b>SUBTOTALS</b> This Period This Page (optional).....	612.03
<b>TOTALS</b> This Period (last page in this line only).....	
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	



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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4283

**DANIEL BOTELHO FOR CONGRESS**

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

**[PERSONAL FUNDS]**

Election: 2012

Daniel S Botelho

Primary

General

Other (specify) ▼

Mailing Address  
126 Buffinton St

City State ZIP Code  
FALL RIVER MA 02721

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
785.14 0.00 785.14

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 05 /

D 31 /

Y 2012 Y

M /

D /

Y 12/31/13 Y

14.99 % (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)..... 785.14

**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) **DANIEL BOTELHO FOR CONGRESS** Transaction ID : **SC/10.4284**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Daniel S Botelho Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address 126 Buffinton St  
 City FALL RIVER State MA ZIP Code 02721

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2128.70	0.00	2128.70

**TERMS**  
 Date Incurred: M 06 / D 30 / Y 2012 Date Due: M / D / Y 12/31/13 Interest Rate: 14.99 % (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)..... ▶ 2128.70  
**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) **DANIEL BOTELHO FOR CONGRESS** Transaction ID : **SC/10.4287**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Daniel S Botelho</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 126 Buffinton St	

City	State	ZIP Code
FALL RIVER	MA	02721

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
654.59	0.00	654.59

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
07 / 30 / 2012	12/31/13	14.99 % (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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	654.59
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>		

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

NAME OF COMMITTEE (In Full) **DANIEL BOTELHO FOR CONGRESS** Transaction ID : **SC/10.4285**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Daniel S Botelho</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 126 Buffinton St	

City	State	ZIP Code
FALL RIVER	MA	02721

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1201.95	0.00	1201.95

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
08 / 30 / 2012	12/31/13	14.99 % (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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	1201.95
<b>TOTALS</b> 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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **DANIEL BOTELHO FOR CONGRESS** Transaction ID : **SC/10.4286**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Daniel S Botelho</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 126 Buffinton St		

City	State	ZIP Code
FALL RIVER	MA	02721

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1417.22	0.00	1417.22

<b>TERMS</b>		Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 30 / Y 2012	M M / D D / Y 12/31/13			14.99 % (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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	1417.22
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>		

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

NAME OF COMMITTEE (In Full) **DANIEL BOTELHO FOR CONGRESS** Transaction ID : **SC/10.4421**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Daniel S Botelho</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 126 Buffinton St	

City	State	ZIP Code
FALL RIVER	MA	02721

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
581.56	0.00	581.56

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
10 / 09 / 2012	12/31/12	14.99 % (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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	581.56
<b>TOTALS</b> 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) **DANIEL BOTELHO FOR CONGRESS** Transaction ID : **SC/10.4470**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Daniel S Botelho</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 126 Buffinton St		

City	State	ZIP Code
FALL RIVER	MA	02721

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
579.16	0.00	579.16

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
11 / 07 / 2012	12/31/2013	14.99 % (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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	579.16
<b>TOTALS</b> This Period (last page in this line only).....	8377.42
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	