

**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

FRIENDS OF FRANK GUINTA

ADDRESS (number and street)

PO BOX 877

Check if different
than previously
reported. (ACC)

MANCHESTER

NH

03105

2. FEC IDENTIFICATION NUMBER ▼

C

C00461350

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NH

01

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

01 / 01 / 2014

through

M M / D D / Y Y Y Y

03 / 31 / 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 BRADLEY T CRATE

Signature of Treasurer

BRADLEY T CRATE

[Electronically Filed]

Date

M M / D D / Y Y Y Y

09 / 19 / 2014

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

FRIENDS OF FRANK GUINTA

Report Covering the Period:

From:

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

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 3 | 1 | | 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)).... | 154504.99 | 323126.42 |
| (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)) | 154504.99 | 323126.42 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 62741.85 | 174041.55 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 1.12 | 461.37 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 62740.73 | 173580.18 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 219907.67 | |
| 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) | 289575.00 | |

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)

PAGE 3 / 73

Write or Type Committee Name

FRIENDS OF FRANK GUINTA

Report Covering the Period:

From:

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

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 3 | 1 | | 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).....**

105750.00

210350.00

(ii) Unitemized.....

9754.99

11757.99

(iii) TOTAL of contributions from individuals ▶

115504.99

222107.99

(b) Political Party Committees.....

0.00

0.00

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

39000.00

101018.43

(d) The Candidate.....

0.00

0.00

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

154504.99

323126.42

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.)

1.12

461.37

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

0.00

2442.57

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

154506.11

326030.36

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 73

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 62741.85 | 174041.55 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 25000.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 25000.00 |
| 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 | 36000.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 62741.85 | 235041.55 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 128143.41 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 154506.11 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 282649.52 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 62741.85 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 219907.67 |

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

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

FOR LINE NUMBER:

PAGE 5 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Ms. LOUISE B ALCOCK

A.

Mailing Address 105 CHERRY BROOK RD

City

WESTON

State

MA

Zip Code

02493-1347

FEC ID number of contributing
federal political committee.

C

Name of Employer

WESTON PUBLIC SCHOOLS

Occupation

ENGLISH TEACHER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4952

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mr. LINO M AVELLANI

B.

Mailing Address PO BOX 516

City

SANBORNVILLE

State

NH

Zip Code

03872

FEC ID number of contributing
federal political committee.

C

Name of Employer

LINO'S RESTAURANT

Occupation

OWNER

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 |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.5036

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Dr YALCIN AYASLI

C.

Mailing Address 75 HAWTHORNE VILLAGE ROAD

City

NASHUA

State

NH

Zip Code

03062

FEC ID number of contributing
federal political committee.

C

Name of Employer

HITTITE MICROWAVE CORPORATION

Occupation

SCIENTIST

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4940

Amount of Each Receipt this Period

2600.00

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

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

5450.00

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

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

FOR LINE NUMBER: PAGE 6 OF 73
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF FRANK GUINTA

| | | | | |
|---|--------------------|---|--|--|
| Full Name (Last, First, Middle Initial) Dr YALCIN AYASLI | | | Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>03 / 12 / 2014</div> </div> | |
| Mailing Address 75 HAWTHORNE VILLAGE ROAD | | | Transaction ID : SA11AI.4941 | |
| City NASHUA | State NH | Zip Code 03062 | Amount of Each Receipt this Period <div> <div></div> <div>2600.00</div> </div> | |
| FEC ID number of contributing federal political committee. C | | | | |
| Name of Employer HITTITE MICROWAVE CORPORATION | | Occupation SCIENTIST | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date <div> <div></div> <div>5200.00</div> </div> | | |

| | | | | |
|---|--------------------|---|--|--|
| Full Name (Last, First, Middle Initial) MICHAEL S BENTON | | | Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>02 / 01 / 2014</div> </div> | |
| Mailing Address 68 TECHNOLOGY DR | | | Transaction ID : SA11AI.5994 | |
| City BEDFORD | State NH | Zip Code 03110 | Amount of Each Receipt this Period <div> <div></div> <div>2600.00</div> </div> | |
| FEC ID number of contributing federal political committee. C | | | | |
| Name of Employer BENTON HOLDINGS LLC | | Occupation OWNER | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date <div> <div></div> <div>2600.00</div> </div> | | |
| | | | BENTON HOLDINGS LLC ATTRIBUTION | |
| | | | [MEMO ITEM] | |

| | | | | |
|---|--------------------|---|--|--|
| Full Name (Last, First, Middle Initial) MICHAEL S BENTON | | | Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>03 / 31 / 2014</div> </div> | |
| Mailing Address 68 TECHNOLOGY DR | | | Transaction ID : SA11AI.5996 | |
| City BEDFORD | State NH | Zip Code 03110 | Amount of Each Receipt this Period <div> <div></div> <div>2600.00</div> </div> | |
| FEC ID number of contributing federal political committee. C | | | | |
| Name of Employer BENTON HOLDINGS LLC | | Occupation OWNER | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date <div> <div></div> <div>5200.00</div> </div> | | |
| | | | BENTON HOLDINGS LLC ATTRIBUTION | |
| | | | [MEMO ITEM] | |

| | |
|--|---|
| SUBTOTAL of Receipts This Page (optional) | <div> <div></div> <div>2600.00</div> </div> |
| TOTAL This Period (last page this line number only) | <div> <div></div> <div></div> </div> |

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 7 OF 73

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

BENTON HOLDINGS LLC

A.

Mailing Address 68 TECHNOLOGY DR

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 01 / 2014

Transaction ID : SA11AI.5073

Amount of Each Receipt this Period

2600.00

PERMISSIBLE FUNDS - SEE ATTRIBUTION

Full Name (Last, First, Middle Initial)

BENTON HOLDINGS LLC

B.

Mailing Address 68 TECHNOLOGY DR

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5072

Amount of Each Receipt this Period

2600.00

PERMISSIBLE FUNDS - SEE ATTRIBUTION

Full Name (Last, First, Middle Initial)

HARVEY BINES

C.

Mailing Address 36 CLACHE STREET

City

LEXINGTON

State

MA

Zip Code

02421

FEC ID number of contributing
federal political committee.

C

Name of Employer

SULLIVAN & WORCESTER LLP

Occupation

ATTORNEY

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.4992

Amount of Each Receipt this Period

500.00

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

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

5700.00

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

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

FOR LINE NUMBER:

PAGE 8 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

RICHARD A BOLDUC

A.

Mailing Address 6 BEAUTY HILL

City

PLAINFIELD

State

NH

Zip Code

03781

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 02 | | 2014 |

Transaction ID : SA11AI.4734

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

RICK BOTNICK

B.

Mailing Address 150 SPRUCE LANE

City

AUBURN

State

NH

Zip Code

03032

FEC ID number of contributing
federal political committee.

C

Name of Employer

BOTNICK 5/VENTURES, INC.

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 27 | | 2014 |

Transaction ID : SA11AI.4876

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mr. MARC BOURGEOIS

C.

Mailing Address PO BOX 289

City

TILTON

State

NH

Zip Code

03276

FEC ID number of contributing
federal political committee.

C

Name of Employer

MB TRACTOR

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4945

Amount of Each Receipt this Period

1000.00

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

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

2000.00

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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Mr. DAVID J BREAZZANO**A.**

Mailing Address 193 DUTTON ROAD

City

SUDBURY

State

MA

Zip Code

01776

FEC ID number of contributing
federal political committee.

C

Name of Employer

DDJ CAPITAL MANAGEMENT, LLC

Occupation

INVESTMENTS

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.4999

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mr. DAVID J BREAZZANO**B.**

Mailing Address 193 DUTTON ROAD

City

SUDBURY

State

MA

Zip Code

01776

FEC ID number of contributing
federal political committee.

C

Name of Employer

DDJ CAPITAL MANAGEMENT, LLC

Occupation

INVESTMENTS

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.5000

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

THOMAS P BROOM**C.**

Mailing Address 371 MOUNTAIN ROAD

City

NEW LONDON

State

NH

Zip Code

03257

FEC ID number of contributing
federal political committee.

C

Name of Employer

STRATEGIC TIMBER, INC

Occupation

INVESTMENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4962

Amount of Each Receipt this Period

1000.00

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

6200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 10 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Mr. SHAUN P CARROLL

Mailing Address PO BOX 319

City

NEW LONDON

State

NH

Zip Code

03257

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARROLL CONCRETE COMPANY

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4903

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

FREDERICK COOLBROTH

Mailing Address 72 NEEDLE EYE ROAD

City

MEREDITH

State

NH

Zip Code

03253

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

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 |
| 02 | | 24 | | 2014 |

Transaction ID : SA11AI.4862

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mr. HARRY A CREWS

Mailing Address 23 ROLLING WOODS DR

City

BEDFORD

State

NH

Zip Code

03110-4539

FEC ID number of contributing
federal political committee.

C

Name of Employer

AUTOFAIR

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4928

Amount of Each Receipt this Period

2600.00

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

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

3850.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 11 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Mr. HARRY A CREWS

Mailing Address 23 ROLLING WOODS DR

City

BEDFORD

State

NH

Zip Code

03110-4539

FEC ID number of contributing
federal political committee.

C

Name of Employer

AUTOFAIR

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.4986

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mr. JOHN J DAGIANIS

Mailing Address 46 CRESTWOOD DR

City

HOLLIS

State

NH

Zip Code

03049

FEC ID number of contributing
federal political committee.

C

Name of Employer

NASHUA EYE ASSOCIATES

Occupation

OPHTHALMOLOGIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4901

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JAMES T DESTEFANO

Mailing Address 65 MICHIGAN AVE

City

MANCHESTER

State

NH

Zip Code

03104

FEC ID number of contributing
federal political committee.

C

Name of Employer

COLLIERS INTERNATIONAL

Occupation

REALTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 10 | | 2014 |

Transaction ID : SA11AI.4710

Amount of Each Receipt this Period

300.00

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

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

3900.00

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

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

FOR LINE NUMBER:

PAGE 12 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Mr. MICHAEL W DION

Mailing Address 49 HANCOCK ST

City

MANCHESTER

State

NH

Zip Code

03101

FEC ID number of contributing
federal political committee.

C

Name of Employer

METRO WALLS

Occupation

OWNER & PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4943

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

KENNETH FOOTE

Mailing Address 31 PASTURE LANE

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer

TRANSUPPORT

Occupation

VICE PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | | 29 | | 2014 |

Transaction ID : SA11AI.4709

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mr. LAURENCE D FOSS

Mailing Address 30 BUNKER HILL AVE

City

STRATHAM

State

NH

Zip Code

03885

FEC ID number of contributing
federal political committee.

C

Name of Employer

FOSS MOTORS INC.

Occupation

PRESIDENT

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 |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4908

Amount of Each Receipt this Period

250.00

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

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

3350.00

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

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

FOR LINE NUMBER:

PAGE 13 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Mr. WILLIAM C GILES

A.

Mailing Address 12 RACHEL WAY

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4886

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mr. WILLIAM C GILES

B.

Mailing Address 12 RACHEL WAY

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

5200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4887

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mr. STEPHEN J GRZYWACZ

C.

Mailing Address 405 CRESTVIEW CIR

City

MANCHESTER

State

NH

Zip Code

03104

FEC ID number of contributing
federal political committee.

C

Name of Employer

MILFORD LUMBER COMPANY

Occupation

PRESIDENT & CEO

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4893

Amount of Each Receipt this Period

250.00

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

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

5450.00

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

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

FOR LINE NUMBER:

PAGE 14 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Mr. RICHARD C GUINTA

Mailing Address 39 WILDWOOD DR

City

BROOKLINE

State

NH

Zip Code

03033-2143

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFO REQUESTED PER BEST EFFORT

Occupation

INFO REQUESTED PER BEST EFFORT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4884

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Mr. ARI HASEOTES

Mailing Address PO BOX 600157

City

NEWTON

State

MA

Zip Code

02460

FEC ID number of contributing
federal political committee.

C

Name of Employer

CUMBERLAND GULF GROUP OF COMPANIE

Occupation

PRESIDENT AND GROUP CHIEF OPERATIN

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 |
| 03 | | 18 | | 2014 |

Transaction ID : SA11AI.4958

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JUDITH P HAVENSTEIN

Mailing Address 112 DEWITT DR

City

ALTON

State

NH

Zip Code

03809

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4897

Amount of Each Receipt this Period

2600.00

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

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

5450.00

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

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

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PAGE 15 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

WALTER P HAVENSTEIN

A.

Mailing Address 112 DEWITT DR

City

ALTON

State

NH

Zip Code

03809

FEC ID number of contributing
federal political committee.

C

Name of Employer

SAIC

Occupation

PRESIDENT & CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4899

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

PATRICIA HUMPHREY

B.

Mailing Address PO BOX 1461

City

CONCORD

State

NH

Zip Code

03302

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 15 | | 2014 |

Transaction ID : SA11AI.4960

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JAMES L JACOBS II

C.

Mailing Address 9 STILLWATER DRIVE

City

AMHERST

State

NH

Zip Code

03031

FEC ID number of contributing
federal political committee.

C

Name of Employer

RAPID SHEET METAL

Occupation

BUSINESS OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.5992

Amount of Each Receipt this Period

1000.00

RAPID REAL ESTATE LLC ATTRIBUTION

[MEMO ITEM]

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

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

3600.00

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

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

FOR LINE NUMBER:

PAGE 16 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

BRUCE M KELLER

A.

Mailing Address 300 RIVER ROAD

#400

City

MANCHESTER

State

NH

Zip Code

03104

FEC ID number of contributing
federal political committee.

C

Name of Employer

KELLER COMPANIES INC

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 05 | | 2014 |

Transaction ID : SA11AI.4843

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

THOMAS V. A. KELSEY

B.

Mailing Address 45 MURRAY HILL SQ

City

NEW PROVIDENCE

State

NJ

Zip Code

07974

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

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 |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.4635

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mr. JOHN KINGSTON

C.

Mailing Address 16 CHESTNUT STREET

City

WINCHESTER

State

MA

Zip Code

01890

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFFILIATED MANAGERS GROUP

Occupation

VICE PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.4996

Amount of Each Receipt this Period

2600.00

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

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

3850.00

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)
FRIENDS OF FRANK GUINTA

| | | | | |
|---|-------------|-------------------------------------|--|--|
| A. Full Name (Last, First, Middle Initial) MATTHEW LEBRETTON | | | Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014 | |
| Mailing Address 8 VOLUNTEER ROAD | | | Transaction ID : SA11AI.5048 | |
| City HINGHAM | State MA | Zip Code 02043 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | | | |
| Name of Employer NEW BALANCE | | Occupation DIRECTOR | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date 1000.00 | | |
| | | | | |
| B. Full Name (Last, First, Middle Initial) GREGG LISCOTTI | | | Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2014 | |
| Mailing Address 83 ORCHARD HILL PARK DRIVE | | | Transaction ID : SA11AI.4964 | |
| City LEOMINSTER | State MA | Zip Code 01453 | Amount of Each Receipt this Period 2600.00 | |
| FEC ID number of contributing federal political committee. C | | | | |
| Name of Employer SELF-EMPLOYED | | Occupation REAL ESTATE DEVELOPER | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date 2600.00 | | |
| | | | | |
| C. Full Name (Last, First, Middle Initial) LINDA LOVERING | | | Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 | |
| Mailing Address 88 POWERS ROAD | | | Transaction ID : SA11AI.5066 | |
| City MEREDITH | State NH | Zip Code 03253 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | | | |
| Name of Employer LOVERING VOLVO | | Occupation BUSINESS OWNER | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date 1000.00 | | |
| | | | | |
| SUBTOTAL of Receipts This Page (optional)..... | | | 4600.00 | |
| TOTAL This Period (last page this line number only)..... | | | | |

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

Use separate schedule(s)
for each category of the
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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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Mr. GORDON J MACDONALD

A.

Mailing Address 900 ELM STREET

City

MANCHESTER

State

NH

Zip Code

03101

FEC ID number of contributing
federal political committee.

C

Name of Employer

NIXON PEABODY, LLP

Occupation

PARTNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4889

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Mr. LEE B MARDEN

B.

Mailing Address PO BOX 1212

City

CONCORD

State

NH

Zip Code

03302-1212

FEC ID number of contributing
federal political committee.

C

Name of Employer

R/E MANAGEMENT

Occupation

SELF

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 |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4947

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mr. DAVID C MCAVOY

C.

Mailing Address 11 MOUNTVIEW RD

City

WELLESLEY HILLS

State

MA

Zip Code

02481

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTHWESTERN MUTUAL

Occupation

FINANCIAL SERVICES

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4910

Amount of Each Receipt this Period

500.00

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

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

1750.00

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

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

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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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

W. CHARLES MCCORMACK

A.

Mailing Address 401 STATE STREET
UNIT M201

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| PORTSMOUTH | NH | 03801 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
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 |
| 02 | | 11 | | 2014 |

Transaction ID : SA11AI.4854

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JOHN MCDONNELL

B.

Mailing Address 63 ATLANTIC AVE 7E

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| BOSTON | MA | 02110 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
PATRON SPIRITS COMPANY

Occupation
COO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | | 01 | | 2014 |

Transaction ID : SA11AI.4690

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JOHN MCDONNELL

C.

Mailing Address 63 ATLANTIC AVE 7E

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| BOSTON | MA | 02110 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
PATRON SPIRITS COMPANY

Occupation
COO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1800.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 27 | | 2014 |

Transaction ID : SA11AI.4882

Amount of Each Receipt this Period

1300.00

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

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

2050.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 20 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

DOUGLAS T MCGINLEY**A.**

Mailing Address 4 BALSAM CT

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer

FIDELITY INVESTMENTS

Occupation

PORTFOLIO MANAGER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 18 | | 2014 |

Transaction ID : SA11AI.4716

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Mr. P ANDREWS MCLANE**B.**

Mailing Address 77 DEAN RD

City

WESTON

State

MA

Zip Code

02493

FEC ID number of contributing
federal political committee.

C

Name of Employer

TA ASSOCIATES, INC.

Occupation

PRIVATE EQUITY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.5018

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

Mr. TERRANCE MCMAHON**C.**

Mailing Address 73 WENDOVER WAY

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASS MUTUAL FINANCIAL GROUP

Occupation

SELF-EMPLOYED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.4988

Amount of Each Receipt this Period

2500.00

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

5500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

SHAWN A MONTY

Mailing Address PO BOX 10535

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer

ENTREPRENEUR

Occupation

ENTREPRENEUR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 19 | | 2014 |

Transaction ID : SA11AI.4872

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

LAURA MORGAN

Mailing Address 400 BEDFORD ST.

City

MANCHESTER

State

NH

Zip Code

03101

FEC ID number of contributing
federal political committee.

C

Name of Employer

MORGAN STORAGE

Occupation

SELF-EMPLOYED

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 |
| 02 | | 24 | | 2014 |

Transaction ID : SA11AI.4860

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mr. PETER NAPOLI

Mailing Address 6 PAGE RD

City

LEXINGTON

State

MA

Zip Code

02420

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE NAPOLI GROUP L.L.C.

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.5024

Amount of Each Receipt this Period

2600.00

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

3850.00

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

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

FOR LINE NUMBER:

PAGE 22 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

MICHAEL NOLAN

A.

Mailing Address 48 MIDDLE ROAD

City

BRENTWOOD

State

NE

Zip Code

03883

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENZYMATICS, INC.Occupation
PRESIDENT

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 |
| 02 | | 05 | | 2014 |

Transaction ID : SA11AI.4841

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mr. CLARE O PARKER

B.

Mailing Address 8 GOONAN RD

City

HOOKSETT

State

NH

Zip Code

03106-2612

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

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.4680

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Mr. ELMER PEASE

C.

Mailing Address 144 W WEBSTER ST
5E

City

MANCHESTER

State

NH

Zip Code

03104

FEC ID number of contributing
federal political committee.

C

Name of Employer
PD ASSOCIATES, LLCOccupation
OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4932

Amount of Each Receipt this Period

1000.00

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

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

2250.00

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

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

FOR LINE NUMBER:

PAGE 23 OF 73

(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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

ELAINE P PETERSEN

A.

Mailing Address 7 MCINTOSH LANE

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTERIM HEALTHCAREOccupation
FOUNDER

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 |
| 02 | | 01 | | 2014 |

Transaction ID : SA11AI.4778

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

GREGORY K PHELPS

B.

Mailing Address 15 MAPLE RD

City

NORTH HAMPTON

State

NH

Zip Code

03862

FEC ID number of contributing
federal political committee.

C

Name of Employer
MANULIFE ASSET MGMTOccupation
PORTFOLIO MANAGER

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 |
| 02 | | 01 | | 2014 |

Transaction ID : SA11AI.4782

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ROBERET PRUNIER

C.

Mailing Address 59 HIDEAWAY LANE

City

HOLLIS

State

NH

Zip Code

03049

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARVEY CONSTRUCTION CORPORATIONOccupation
BUSINESS OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | | 23 | | 2014 |

Transaction ID : SA11AI.4699

Amount of Each Receipt this Period

1000.00

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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Mr. DANIEL J QUIRK

Mailing Address PO BOX 850972

City

BRAINTREE

State

MA

Zip Code

02185

FEC ID number of contributing
federal political committee.

C

Name of Employer

QUIRK CAR COMPANIES

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4950

Amount of Each Receipt this Period

1000.00

A.

Full Name (Last, First, Middle Initial)

RAPID REAL ESTATE LLC

Mailing Address 104 PERIMETER RD

City

NASHUA

State

NH

Zip Code

03063

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.5070

Amount of Each Receipt this Period

1000.00

PERMISSIBLE FUNDS - SEE ATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ROBERT L REYNOLDS

Mailing Address 153 GARFIELD ROAD

City

CONCORD

State

MA

Zip Code

01742

FEC ID number of contributing
federal political committee.

C

Name of Employer

PUTNAM INVESTMENTS

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 28 | | 2014 |

Transaction ID : SA11AI.5046

Amount of Each Receipt this Period

2500.00

C.

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 25 OF 73
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF FRANK GUINTA

| | | | | |
|---|-------|-----------------------------------|--|--|
| A. Full Name (Last, First, Middle Initial) WILLIAM RITCHIE | | | Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014 | |
| Mailing Address 5302 BROOKWAY DRIVE | | | Transaction ID : SA11AI.5044 | |
| City | State | Zip Code | | |
| BETHESDA | MD | 20816 | | |
| FEC ID number of contributing federal political committee. | | C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer RETIRED | | Occupation RETIRED | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date 300.00 | | |
| B. Full Name (Last, First, Middle Initial) WILLIAM RITCHIE | | | Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 | |
| Mailing Address 5302 BROOKWAY DRIVE | | | Transaction ID : SA11AI.5060 | |
| City | State | Zip Code | | |
| BETHESDA | MD | 20816 | | |
| FEC ID number of contributing federal political committee. | | C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer RETIRED | | Occupation RETIRED | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date 400.00 | | |
| C. Full Name (Last, First, Middle Initial) Mr. CHARLES F ROLECEK | | | Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 | |
| Mailing Address 149 HANOVER ST | | | Transaction ID : SA11AI.4647 | |
| City | State | Zip Code | | |
| MANCHESTER | NH | 03101 | | |
| FEC ID number of contributing federal political committee. | | C | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer C.R. SPARKS RESTAURANTS | | Occupation OWNER | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date 1000.00 | | |
| SUBTOTAL of Receipts This Page (optional)..... | | | 1200.00 | |
| TOTAL This Period (last page this line number only)..... | | | | |

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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

ROBERT L RORHER Jr

A.

Mailing Address 18 CRICKET CORNER RD

City

AMHERST

State

NH

Zip Code

03031

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

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 |
| 02 | | 10 | | 2014 |

Transaction ID : SA11AI.4712

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ANTHONY H RYAN

B.

Mailing Address 83 DORCHESTER RD

City

LYME

State

NH

Zip Code

03768

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

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 |
| 02 | | 01 | | 2014 |

Transaction ID : SA11AI.4805

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

STEPHANIE SALVAGNO

C.

Mailing Address 901 6TH STREET SW
912A

City

WASHINGTON

State

DC

Zip Code

20024

FEC ID number of contributing
federal political committee.

C

Name of Employer

NATIONAL MINING ASSN.

Occupation

POLITICAL DIRECTOR

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 |
| 03 | | 23 | | 2014 |

Transaction ID : SA11AI.4969

Amount of Each Receipt this Period

250.00

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

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

750.00

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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

DONNA SHAW

A.

Mailing Address 5 HUNT RD

City

KINGSTON

State

NH

Zip Code

03841

FEC ID number of contributing
federal political committee.

C

Name of Employer

RICK'S MOTORSPORT ELECTRICS, INC.

Occupation

ADMINISTRATOR

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 |
| 02 | | 02 | | 2014 |

Transaction ID : SA11AI.4742

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

WILLIAM SMITH

B.

Mailing Address PO BOX 808

City

NEW CASTLE

State

NH

Zip Code

03854

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 27 | | 2014 |

Transaction ID : SA11AI.4881

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

STEVEN SNIDER

C.

Mailing Address 122 SHORNECLIFFE RD

City

NEWTON

State

MA

Zip Code

02458

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4948

Amount of Each Receipt this Period

500.00

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

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

1750.00

**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 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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Ms. GRACE SOLINSKY**A.**

Mailing Address 59 ROLLING WOODS DRIVE

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.4994

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Ms. GRACE SOLINSKY**B.**

Mailing Address 59 ROLLING WOODS DRIVE

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.5007

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

CRAIG STEVENS**C.**

Mailing Address 130 MCALLISTER ROAD

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer
DCI GROUPOccupation
PR CONSULTANT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 29 | | 2014 |

Transaction ID : SA11AI.5054

Amount of Each Receipt this Period

1000.00

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

6200.00

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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

WILLIAM E STEVENS

A.

Mailing Address 5 THISTLE LANE

City

HOOKSETT

State

NH

Zip Code

03106

FEC ID number of contributing
federal political committee.

C

Name of Employer

HARVEY CONSTRUCTION

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 02 | | 2014 |

Transaction ID : SA11AI.4736

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JULIAN STOGNIEW

B.

Mailing Address 315 PLEASANT POND WAY

City

MANCHESTER

State

NH

Zip Code

03102

FEC ID number of contributing
federal political committee.

C

Name of Employer

PPNE

Occupation

PRESIDENT AND CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 26 | | 2014 |

Transaction ID : SA11AI.4878

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

JULIAN STOGNIEW

C.

Mailing Address 315 PLEASANT POND WAY

City

MANCHESTER

State

NH

Zip Code

03102

FEC ID number of contributing
federal political committee.

C

Name of Employer

PPNE

Occupation

PRESIDENT AND CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 26 | | 2014 |

Transaction ID : SA11AI.4879

Amount of Each Receipt this Period

400.00

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

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

4000.00

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

Use separate schedule(s)
for each category of the
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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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Mr. ELAINE H SWENSON

Mailing Address 336 PUTNEY HILL RD

City

HOPKINTON

State

NH

Zip Code

03229

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFO REQUESTED PER BEST EFFORT

Occupation

INFO REQUESTED PER BEST EFFORT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.4649

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

FREDERICK TAUSCH

Mailing Address 75 WILSON HILL ROAD

City

MERRIMACK

State

NH

Zip Code

03054

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.5059

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

SIOBHAN TAUTKUS

Mailing Address 132 ARAH STREET

City

MANCHESTER

State

NH

Zip Code

03104

FEC ID number of contributing
federal political committee.

C

Name of Employer

ABBOTT EXECUTIVE SEARCH

Occupation

FOUNDING PRINCIPAL

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 14 | | 2014 |

Transaction ID : SA11AI.4858

Amount of Each Receipt this Period

500.00

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

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

4100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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 (check only one)

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| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Mr. JOHN M TINIOS

Mailing Address 10 ST ANDREWS WAY

City

STRATHAM

State

NH

Zip Code

03885-2499

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

GALLEY HATCH RESTAURANT

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.5028

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mr. DONALD J TRUMP

Mailing Address 725 5TH AVENUE

City

NEW YORK

State

NY

Zip Code

10022

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

THE TRUMP ORGANIZATION

Occupation

FOUNDER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.5002

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

PAMELA Z TUCKER

Mailing Address 15 EAGLE CT

City

GREENLAND

State

NH

Zip Code

03840

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

STATE OF NEW HAMPSHIRE

Occupation

STATE REPRESENTATIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 12 | | 2014 |

Transaction ID : SA11AI.4906

Amount of Each Receipt this Period

500.00

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

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

2000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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 (check only one)

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| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)
FRIENDS OF FRANK GUINTA

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) JOHN E TULLEY II | | Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 |
| Mailing Address 147 DW HWY | | Transaction ID : SA11AI.4682 |
| City NASHUA | State NH | Zip Code 03060 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer SELF EMPLOYED | Occupation AUTO DEALER | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) JAMES M TULLY | | Date of Receipt M M / D D / Y Y Y Y 02 / 01 / 2014 |
| Mailing Address P.O. BOX 53 | | Transaction ID : SA11AI.4809 |
| City EAST WAKEFIELD | State NH | Zip Code 03830 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer WOODMAN ASSOCIATED INC | Occupation FOUNDER | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Mr. JIM WATSON | | Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 |
| Mailing Address 18 PURITAN DRIVE | | Transaction ID : SA11AI.4973 |
| City BEDFORD | State NH | Zip Code 03110 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2600.00 |
| Name of Employer WATSON INSURANCE AGENCY | Occupation SELF | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2600.00 | |

| | |
|---|----------------|
| SUBTOTAL of Receipts This Page (optional)..... | 3350.00 |
| TOTAL This Period (last page this line number only)..... | |

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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

Ms. SUSAN WATSON

Mailing Address 18 PURITAN DRIVE

City

BEDFORD

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.4975

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

DAVID C WEINSTEIN

Mailing Address 158 COTTON ST

City

NEWTON

State

MA

Zip Code

02458

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
ATTORNEY

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : SA11AI.4997

Amount of Each Receipt this Period

2600.00

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 M | / | D 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).....

5000.00

105750.00

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

A.

Mailing Address 520 N. NORTHWEST HIGHWAY

City

PARK RIDGE

State

IL

Zip Code

60068

FEC ID number of contributing
federal political committee.

C C00255752

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2014

Transaction ID : SA11C.5081

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC PAC)

B.

Mailing Address 440 FIRST STREET NW
SUITE 200

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00010421

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.5103

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC PAC)

C.

Mailing Address 440 FIRST STREET NW
SUITE 200

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00010421

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.5106

Amount of Each Receipt this Period

2500.00

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

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

10000.00

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

Use separate schedule(s)
for each category of the
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| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)

A.

Mailing Address 1101 WILSON BLVD.

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing
federal political committee.

C C00281212

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2014

Transaction ID : SA11C.5079

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)

B.

Mailing Address 1101 WILSON BLVD.

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing
federal political committee.

C C00281212

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2014

Transaction ID : SA11C.5082

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

CONGRESSIONAL HOUSE REPUBLICANS IN SERVICE PAC (CHRIS PAC)

C.

Mailing Address PO BOX 30844

City

BETHESDA

State

MD

Zip Code

20824

FEC ID number of contributing
federal political committee.

C C00554535

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.5086

Amount of Each Receipt this Period

1000.00

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

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

6000.00

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

Use separate schedule(s)
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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

DISTILLED SPIRITS COUNCIL OF THE UNITED STATES INC POLITICAL ACTION COMMITTEE

A.

Mailing Address 1250 EYE ST., NW #400

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00030734

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2014

Transaction ID : SA11C.5088

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

FULL HOUSE PAC

B.

Mailing Address PO BOX 530520

City

HENDERSON

State

NV

Zip Code

89053

FEC ID number of contributing
federal political committee.

C C00541128

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2014

Transaction ID : SA11C.5084

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

HEARTDOCPAC

C.

Mailing Address PO BOX 628

City

EVANSVILLE

State

IN

Zip Code

47704

FEC ID number of contributing
federal political committee.

C C00523381

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
01 16 2014

Transaction ID : SA11C.5075

Amount of Each Receipt this Period

1000.00

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

2500.00

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

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

Use separate schedule(s)
for each category of the
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| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

KBR, INC. PAC

Mailing Address 601 JEFFERSON

SUITE 3746C

City

HOUSTON

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C C00431114

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.5105

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14TH STREET, NW

SUITE 800

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00236489

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.5095

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

LIBERTY MUTUAL INSURANCE COMPANY - PAC

Mailing Address 175 BERKELEY STREET

City

BOSTON

State

MA

Zip Code

02117

FEC ID number of contributing
federal political committee.

C C00171843

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.5092

Amount of Each Receipt this Period

1000.00

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

5000.00

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

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

Use separate schedule(s)
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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF FRANK GUINTA

| | | | |
|---|-----------------------------------|--|---|
| A. Full Name (Last, First, Middle Initial) PEOPLE'S SEAT PAC, THE | | Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2014 | |
| Mailing Address 85 MERRIMAC ST STE 400 | | Transaction ID : SA11C.5077 | |
| City BOSTON | State MA | Zip Code 02114 | Amount of Each Receipt this Period 4000.00 |
| FEC ID number of contributing federal political committee. C C00467233 | | | |
| Name of Employer | Occupation | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 4000.00 | | |
| B. Full Name (Last, First, Middle Initial) PUTNAM INVESTMENTS, LLC POLITICAL ACTION COMMITTEE ('PUTNAM PAC') | | Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 | |
| Mailing Address ONE POST OFFICE SQUARE | | Transaction ID : SA11C.5090 | |
| City BOSTON | State MA | Zip Code 02109 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C C00289595 | | | |
| Name of Employer | Occupation | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | | |
| C. Full Name (Last, First, Middle Initial) RAUL LABRADOR FOR IDAHO | | Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 | |
| Mailing Address PO BOX 1616 | | Transaction ID : SA11C.4633 | |
| City BOISE | State ID | Zip Code 83701 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C C00470948 | | | |
| Name of Employer | Occupation | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | | |
| SUBTOTAL of Receipts This Page (optional)..... | | 5000.00 | |
| TOTAL This Period (last page this line number only)..... | | | |

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 39 OF 73

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF FRANK GUINTA

A. Full Name (Last, First, Middle Initial)
REPUBLICAN OPERATION TO SECURE AND KEEP A MAJORITY (ROSKAM PAC)

Mailing Address P. O. BOX 1011

| | | |
|-----------------|-------------|-------------------|
| City WHEATON | State IL | Zip Code 60187 |
|-----------------|-------------|-------------------|

FEC ID number of contributing
federal political committee.

C C00451294

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

| | | | | |
|-------------|---|-------------|---|-------------------|
| M M M 03 | / | D D D 31 | / | Y Y Y Y Y 2014 |
|-------------|---|-------------|---|-------------------|

Transaction ID : SA11C.5101

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
SAFARI CLUB INTERNATIONAL PAC (SCI-PAC)

Mailing Address 4800 W. GATES PASS ROAD

| | | |
|----------------|-------------|-------------------|
| City TUCSON | State AZ | Zip Code 85745 |
|----------------|-------------|-------------------|

FEC ID number of contributing
federal political committee.

C C00122101

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------------|---|-------------|---|-------------------|
| M M M 03 | / | D D D 31 | / | Y Y Y Y Y 2014 |
|-------------|---|-------------|---|-------------------|

Transaction ID : SA11C.5094

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Mailing Address 701 PENNSYLVANIA AVENUE, NW
SUITE 750

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20004 |
|--------------------|-------------|-------------------|

FEC ID number of contributing
federal political committee.

C C00039578

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------------|---|-------------|---|-------------------|
| M M M 03 | / | D D D 31 | / | Y Y Y Y Y 2014 |
|-------------|---|-------------|---|-------------------|

Transaction ID : SA11C.5097

Amount of Each Receipt this Period

1000.00

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

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

7000.00

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)

PAGE 40 OF 73

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

TREY GOWDY FOR CONGRESS

Mailing Address PO BOX 3324

City

SPARTANBURG

State

SC

Zip Code

29304

FEC ID number of contributing
federal political committee.

C C00462523

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

03 / **31** / **2014**

Transaction ID : SA11C.4631

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

VERIZON COMMUNICATIONS INC./VERIZON WIRELESS GOOD GOVERNMENT CLUB (VERIZON/VERIZON WIRELES

Mailing Address 1300 I ST NW, STE 400 WEST
ATTN: TAYLOR CRAIG

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00186288

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

03 / **31** / **2014**

Transaction ID : SA11C.5099

Amount of Each Receipt this Period

2500.00

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

03 / **31** / **2014**

Amount of Each Receipt this Period

3500.00

39000.00

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

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 PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. BARCLAY'S BANK CARD

Mailing Address P.O. BOX 877

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| MANCHESTER | NH | 03105 |

Purpose of Disbursement
CANDIDATE TRAVEL: SEE MEMO ENTRIES

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 |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1409.53 |
|---------|

Transaction ID : SB17.4517

B. BARCLAYS BANKMailing Address 125 HIGH STREET
16

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| BOSTON | MA | 02110 |

Purpose of Disbursement
BANK 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 |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Transaction ID : SB17.4588

[MEMO ITEM]

C. BARCLAYS BANKMailing Address 125 HIGH STREET
16

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| BOSTON | MA | 02110 |

Purpose of Disbursement
BANK 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 |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 23.62 |
|-------|

Transaction ID : SB17.4589

[MEMO ITEM]

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

1409.53

**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 42 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. BARCLAYS BANKMailing Address 125 HIGH STREET
16

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
BANK FEES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 25.79 |
|-------|

Transaction ID : SB17.4590

[MEMO ITEM]**B. BARCLAYS BANK**Mailing Address 125 HIGH STREET
16

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
BANK FEES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Transaction ID : SB17.4591

[MEMO ITEM]**C. BARCLAYS BANK**Mailing Address 125 HIGH STREET
16

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
BANK FEES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 27.10 |
|-------|

Transaction ID : SB17.4592

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

| |
|------|
| 0.00 |
|------|

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

PAGE 43 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. BARCLAYS BANKMailing Address 125 HIGH STREET
16

City BOSTON State MA Zip Code 02110

Purpose of Disbursement
BANK 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 |
| 03 | 13 | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Transaction ID : SB17.4593

[MEMO ITEM]**B. DAYS INN**

Mailing Address 1234 SOLDIERS FIELD ROAD

City BOSTON State MA Zip Code 21354

Purpose of Disbursement
TRAVEL: LODGING

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 |
| 03 | 13 | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 120.31 |
|--------|

Transaction ID : SB17.4595

[MEMO ITEM]**C. EPAY BUSINESS SOLUTIONS INC**Mailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

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 |
| 01 | 15 | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 60.30 |
|-------|

Transaction ID : SB17.4563

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

| |
|-------|
| 60.30 |
|-------|

| |
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| |
|--|

**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 44 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

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 |
| 01 | | 15 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 208.06 |
|--------|

Transaction ID : SB17.4564

B. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

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 |
| 01 | | 27 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 301.59 |
|--------|

Transaction ID : SB17.4518

C. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

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 |
| 01 | | 31 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 38.30 |
|-------|

Transaction ID : SB17.4567

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

547.95

**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 45 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 31 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 208.06 |
|--------|

Transaction ID : SB17.4568

B. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 14 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 35.30 |
|-------|

Transaction ID : SB17.4571

C. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 14 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 208.06 |
|--------|

Transaction ID : SB17.4572

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

451.42

**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 46 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

Candidate Name

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

State: District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02 | 28 | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 35.30 |
|-------|

Transaction ID : SB17.4575

B. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

Candidate Name

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

State: District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02 | 28 | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 208.06 |
|--------|

Transaction ID : SB17.4576

C. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

Candidate Name

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

State: District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03 | 15 | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 35.30 |
|-------|

Transaction ID : SB17.4579

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

278.66

**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 47 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

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 |
| 03 | 15 | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 208.06 |
|--------|

Transaction ID : SB17.4580

B. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

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 |
| 03 | 28 | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 36.70 |
|-------|

Transaction ID : SB17.4585

C. EPAY BUSINESS SOLUTIONS INCMailing Address 27A MIDSTATE DR
SUITE 218

City AUBURN State MA Zip Code 01501

Purpose of Disbursement
PAYROLL SERVICES/TAX

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 |
| 03 | 28 | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 478.81 |
|--------|

Transaction ID : SB17.4586

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

723.57

**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 48 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1601 WILLOW RD

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| MENLO PARK | CA | 94025 |

Purpose of Disbursement
ONLINE ADVERTISING

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 |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 6.99 |
|------|

Transaction ID : SB17.4597

[MEMO ITEM]**B. GARRETT GAUTHIER**

Mailing Address 5 JAMES CITY RD

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| DEERFIELD | NH | 03037 |

Purpose of Disbursement
PAYROLL

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 |
| 01 | | 15 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 650.00 |
|--------|

Transaction ID : SB17.4561

C. GARRETT GAUTHIER

Mailing Address 5 JAMES CITY RD

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| DEERFIELD | NH | 03037 |

Purpose of Disbursement
PAYROLL

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 |
| 01 | | 31 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 650.00 |
|--------|

Transaction ID : SB17.4565

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

1300.00

**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 49 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. GARRETT GAUTHIER

Mailing Address 5 JAMES CITY RD

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| DEERFIELD | NH | 03037 |

Purpose of Disbursement
PAYROLL

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 |
| 02 | | 14 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 650.00 |
|--------|

Transaction ID : SB17.4569

B. GARRETT GAUTHIER

Mailing Address 5 JAMES CITY RD

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| DEERFIELD | NH | 03037 |

Purpose of Disbursement
PAYROLL

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 |
| 02 | | 28 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 650.00 |
|--------|

Transaction ID : SB17.4573

C. GARRETT GAUTHIER

Mailing Address 5 JAMES CITY RD

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| DEERFIELD | NH | 03037 |

Purpose of Disbursement
PAYROLL

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 |
| 03 | | 15 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 650.00 |
|--------|

Transaction ID : SB17.4577

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

1950.00

**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 50 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. GARRETT GAUTHIER

Mailing Address 5 JAMES CITY RD

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| DEERFIELD | NH | 03037 |

Purpose of Disbursement
PAYROLL

Candidate Name

| | |
|----------------|------------------------------------|
| 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 |
| 03 | | 28 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 650.00 |
|--------|

Transaction ID : SB17.4581

B. GORDON BIRSCH

Mailing Address 900 F Street NW

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20004 |

Purpose of Disbursement
TRAVEL: FOOD

Candidate Name

| | |
|----------------|------------------------------------|
| 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 |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 16.96 |
|-------|

Transaction ID : SB17.4599

[MEMO ITEM]

C. HALEY O'NEILL, LLC

Mailing Address P.O. BOX 16015

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| ALEXANDRIA | VA | 22302 |

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

| | |
|----------------|------------------------------------|
| 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 |
| 01 | | 06 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 6617.83 |
|---------|

Transaction ID : SB17.4520

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

7267.83

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

PAGE 51 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. L'ENFANT PLAZA HOTEL

Mailing Address 480 L'ENFANT PLAZA

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| WASHINGTON | DC | 20024 |

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

| | |
|----------------|------------------------------------|
| 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 |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 209.63 |
|--------|

Transaction ID : SB17.4601

[MEMO ITEM]**B. L'ENFANT PLAZA HOTEL**

Mailing Address 480 L'ENFANT PLAZA

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| WASHINGTON | DC | 20024 |

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

| | |
|----------------|------------------------------------|
| 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 |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 262.80 |
|--------|

Transaction ID : SB17.4602

[MEMO ITEM]**C. LAZ PARKING**Mailing Address 4 COPLEY PLACE
SUITE 440A

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| BOSTON | MA | 02116 |

Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION

Candidate Name

| | |
|----------------|------------------------------------|
| 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 |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 23.00 |
|-------|

Transaction ID : SB17.4604

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

| |
|------|
| 0.00 |
|------|

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**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 52 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. MARBLEPORT LLCMailing Address 137 WEST MERRIMACK STREET
NO. 2

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
STRATEGY CONSULTING

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 |
| 01 | | 22 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 7500.00 |
|---------|

Transaction ID : SB17.4524

B. MY PRINT & COPY, LLCMailing Address 100 CUMMINGS CENTER
SUITE 210D

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
PRINTING & DESIGN SERVICES

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 |
| 01 | | 07 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 425.90 |
|--------|

Transaction ID : SB17.4526

C. OFFICE ALTERNATIVES, LLC

Mailing Address 186 GRANITE STREET

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
OFFICE EQUIPMENT

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 |
| 02 | | 18 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 721.00 |
|--------|

Transaction ID : SB17.4609

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

8646.90

**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 53 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. PEOPLE'S SEAT PACMailing Address 85 MERRIMAC STREET
STE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
LIST RENTAL

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 04 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2700.00 |
|---------|

Transaction ID : SB17.4528

B. PRECISION MARKETING, INC

Mailing Address P.O. BOX 7670

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement
DIRECT MAIL PRINTING

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 4212.00 |
|---------|

Transaction ID : SB17.4530

C. RED CURVE SOLUTIONSMailing Address 138 CONANT STREET
1ST FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 22 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

Transaction ID : SB17.4531

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

8912.00

**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 54 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONSMailing Address 138 CONANT STREET
1ST FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 21 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

Transaction ID : SB17.4532

B. RED CURVE SOLUTIONSMailing Address 138 CONANT STREET
1ST FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2001.25 |
|---------|

Transaction ID : SB17.4533

C. RED OAKMailing Address 66 HANOVER STREET
STE. 300

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
RENT & UTILITIES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 06 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 552.50 |
|--------|

Transaction ID : SB17.4535

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

4553.75

**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 55 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. RED OAKMailing Address 66 HANOVER STREET
STE. 300

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
RENT & UTILITIES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 04 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Transaction ID : SB17.4536

B. RED OAKMailing Address 66 HANOVER STREET
STE. 300

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
RENT & UTILITIES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Transaction ID : SB17.4537

C. JAY RUAIS

Mailing Address 28 ZION HILL RD

City SALEM State NH Zip Code 03079

Purpose of Disbursement
PAYROLL

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 28 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2500.00 |
|---------|

Transaction ID : SB17.4584

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

3500.00

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

PAGE 56 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. SCR & ASSOCIATES LLCMailing Address 100 TRADE CENTER
SUITE G-700

City WOBURN State MA Zip Code 01801

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 06 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 3000.00 |
|---------|

Transaction ID : SB17.4538

B. SCR & ASSOCIATES LLCMailing Address 100 TRADE CENTER
SUITE G-700

City WOBURN State MA Zip Code 01801

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 21 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 4860.00 |
|---------|

Transaction ID : SB17.4539

C. SEACOAST BUSINESS MACHINES INC

Mailing Address 11 COLONIAL WAY

City BURLINGTON State NH Zip Code 03825

Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 14 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 280.03 |
|--------|

Transaction ID : SB17.4541

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

8140.03

**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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. SRCP MEDIA, INC.

Mailing Address 201 N. UNION STREET

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| ALEXANDRIA | VA | 22314 |

Purpose of Disbursement
AUDIO VISUAL SERVICE

Candidate Name

| | |
|----------------|------------------------------------|
| 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 |
| 01 | | 07 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1293.24 |
|---------|

Transaction ID : SB17.4542

B. STAPLES

Mailing Address 659 WORCESTER RD

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| FRAMINGHAM | MA | 01701 |

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

| | |
|----------------|------------------------------------|
| 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 |
| 02 | | 18 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 119.13 |
|--------|

Transaction ID : SB17.4614

C. STAPLES

Mailing Address 659 WORCESTER RD

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| FRAMINGHAM | MA | 01701 |

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

| | |
|----------------|------------------------------------|
| 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 |
| 02 | | 18 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 189.99 |
|--------|

Transaction ID : SB17.4615

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

1602.36

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse 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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. EMMA TAUTKUS

Mailing Address 132 ARAH STREET

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| MANCHESTER | NH | 03104 |

Purpose of Disbursement
PAYROLL

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 |
| 01 | | 15 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1250.00 |
|---------|

Transaction ID : SB17.4562

B. EMMA TAUTKUS

Mailing Address 132 ARAH STREET

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| MANCHESTER | NH | 03104 |

Purpose of Disbursement
PAYROLL

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 |
| 01 | | 31 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1250.00 |
|---------|

Transaction ID : SB17.4566

C. EMMA TAUTKUS

Mailing Address 132 ARAH STREET

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| MANCHESTER | NH | 03104 |

Purpose of Disbursement
PAYROLL

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 |
| 02 | | 14 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1250.00 |
|---------|

Transaction ID : SB17.4570

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

3750.00

**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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. THE PROSPER GROUP CORPORATIONMailing Address 435 EAST MAIN STREET
STE 250

City GREENWOOD State IN Zip Code 46143

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1790.30 |
|---------|

Transaction ID : SB17.4544

B. THE PROSPER GROUP CORPORATIONMailing Address 435 EAST MAIN STREET
STE 250

City GREENWOOD State IN Zip Code 46143

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 14 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1189.91 |
|---------|

Transaction ID : SB17.4545

C. THE TOWNSEND GROUP

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 07 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 865.43 |
|--------|

Transaction ID : SB17.4547

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

3845.64

**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 64 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. TRANSAXTMailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 95.12 |
|-------|

Transaction ID : SB17.4554

B. TRANSAXTMailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 21 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 35.98 |
|-------|

Transaction ID : SB17.4555

C. TRANSAXTMailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 26 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 85.92 |
|-------|

Transaction ID : SB17.4556

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

217.02

**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 65 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. TRANSAXTMailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 06 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 261.00 |
|--------|

Transaction ID : SB17.4557

B. TRANSAXTMailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 4.50 |
|------|

Transaction ID : SB17.4558

C. TRANSAXTMailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

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

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 19 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 207.00 |
|--------|

Transaction ID : SB17.4559

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

472.50

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

PAGE 66 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. TRANSAXTMailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT 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 |
| 03 | 27 | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 17.98 |
|-------|

Transaction ID : SB17.4560

B. UBER

Mailing Address 186 S STREET

City BOSTON State MA Zip Code 02111

Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION

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 |
| 03 | 13 | 2014 |

Amount of Each Disbursement this Period

| |
|------|
| 9.38 |
|------|

Transaction ID : SB17.4620

[MEMO ITEM]

C. UBER

Mailing Address 186 S STREET

City BOSTON State MA Zip Code 02111

Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION

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 |
| 03 | 13 | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 17.09 |
|-------|

Transaction ID : SB17.4621

[MEMO ITEM]

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

| |
|-------|
| 17.98 |
|-------|

| |
|--|
| |
|--|

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

PAGE 67 OF 73

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)

FRIENDS OF FRANK GUINTA

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 186 S STREET

City
BOSTONState
MAZip Code
02111Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION

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 |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 21.60 |
|-------|

Transaction ID : SB17.4622

[MEMO ITEM]**B. USAIR**

Mailing Address 4000 W. SKY HARBOR BLVD

City
PHOENIXState
AZZip Code
85034Purpose of Disbursement
TRAVEL: AIR

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 |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 365.80 |
|--------|

Transaction ID : SB17.4624

[MEMO ITEM]**C. VERIZON WIRELESS**

Mailing Address PO BOX 15062

City
ALBANYState
NYZip Code
12212Purpose of Disbursement
MOBILE PHONE EXPENSE

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 |
| 03 | | 13 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 170.00 |
|--------|

Transaction ID : SB17.4628

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

| |
|------|
| 0.00 |
|------|

| |
|----------|
| 62446.93 |
|----------|

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

PAGE 68 OF 73

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4110

FRIENDS OF FRANK GUINTA

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

[PERSONAL FUNDS]

Election: 2010

FRANK GUINTA

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 877

City

State

ZIP Code

MANCHESTER

NH

03105

Original Amount of Loan

100000.00

Cumulative Payment To Date

46500.00

Balance Outstanding at Close of This Period

53500.00

TERMS

Date Incurred

M / D / Y
03 / 28 / 2010

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)..... ►

53500.00

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 69 OF 73

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 : SC/10.4113

FRIENDS OF FRANK GUINTA

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

[PERSONAL FUNDS]

Election: 2010

FRANK GUINTA

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 877

City

State

ZIP Code

MANCHESTER

NH

03105

Original Amount of Loan

125000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

125000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 27 / 2010

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)..... ►

125000.00

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

PAGE 70 OF 73

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4114

FRIENDS OF FRANK GUINTA

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

[PERSONAL FUNDS]

Election: 2010

FRANK GUINTA

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 877

City

State

ZIP Code

MANCHESTER

NH

03105

Original Amount of Loan

60000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

60000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 03 / 2010

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)..... ►

60000.00

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 71 OF 73

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 : SC/10.4115

FRIENDS OF FRANK GUINTA

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

[PERSONAL FUNDS]

Election: 2010

FRANK GUINTA

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 877

City

State

ZIP Code

MANCHESTER

NH

03105

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
09 / 10 / 2010M 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)..... ►

50000.00

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

288500.00

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 72 OF 73

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

NAME OF COMMITTEE (In Full)

FRIENDS OF FRANK GUINTA

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

Campaign Financial Services

Nature of Debt (Purpose):

Compliance Consulting

Mailing Address PO Box 30844

City State

Zip Code

Bethesda

MD

20824

Outstanding Balance Beginning This Period

385.00

Transaction ID : SD10.4145

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

385.00

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

Campaign Financial Services

Nature of Debt (Purpose):

Compliance Consulting

Mailing Address PO Box 30844

City State

Zip Code

Bethesda

MD

20824

Outstanding Balance Beginning This Period

110.00

Transaction ID : SD10.4151

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

110.00

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

Campaign Financial Services

Nature of Debt (Purpose):

Compliance Consulting

Mailing Address PO Box 30844

City

State

Zip Code

Bethesda

MD

20824

Outstanding Balance Beginning This Period

110.00

Transaction ID : SD10.4156

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

110.00

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

605.00

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 73 OF 73

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

NAME OF COMMITTEE (In Full)

FRIENDS OF FRANK GUINTA

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

Campaign Financial ServicesNature of Debt (Purpose):
Compliance Consulting

Mailing Address PO Box 30844

City State

Zip Code

Bethesda

MD

20824

Outstanding Balance Beginning This Period

110.00

Transaction ID : SD10.4161

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

110.00

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

Campaign Financial ServicesNature of Debt (Purpose):
Compliance Consulting

Mailing Address PO Box 30844

City State

Zip Code

Bethesda

MD

20824

Outstanding Balance Beginning This Period

360.00

Transaction ID : SD10.4169

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

360.00

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

470.00

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

1075.00

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

288500.00

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

289575.00