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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For An	_	ized Comr	nittee			Office	e Use Only
NAME OF COMMITTEE (in	full)	TYPE OR PRII	NT ▼		mple: If typing	g, type	12FE4M5	5	
Mark Greenbe	rg for (Congress							ı
ADDRESS (number ar	nd street)	53 Peck Rd							
Check if dif	ferent								
than previous reported. (A		Torrington					CT	06790	-6106
2. FEC IDENTIFIC	CATION	NUMBER ▼		CITY			STATE A		ZIP CODE
C C0049339	95		3.	IS THIS	× NEW		AMENI	DED	STATE ▼ DISTRICT
				REPORT	(N)	OR	(A)		CT 05
4. TYPE OF RE	PORT (Chaosa Ona)							
(a) Quarterly R		onloose one)	(b)	12-Day PRE -	Election Repo	rt for the:			
		5 (2.1)			Primary (12P)		General (12G)	Runoff (12R)
April 15	Quarterl	y Report (Q1)			Convention (1	12C)	Special (1	12S)	
July 15	Quarterly	Report (Q2)							
X Octobe	r 15 Quai	rterly Report (Q3)		Election on	M - M /	D " D /	Y - Y - Y - Y		in the State of
January	/ 31 Year-	-End Report (YE)	(c) 3		-Election Rep	ort for the:			
					General (30G)		Runoff (3	0R)	Special (30S)
Termina	ation Repo	ort (TER)			M M /	D D /	Y " Y " Y " Y	-	in the
		,		Election on	W W /				State of
			I						
	N	1 M / D D	/ Y)	/ Y Y		ММ	/ D D /	Υ	Y Y Y
5. Covering Period	L	07 01		015	through	09	30		2015
I certify that I have e	examined	this Report and	to the be	est of my kno	owledge and k	pelief it is tro	ue, correct an	d com	nplete.
Type or Print Name	of Treasu	J. Kenneth I	Nowell						
Signature of Treasure	er <i>J</i> .	Kenneth Nowell		I	Electronically F	Filed] D	vate 10	/	05 / Y Y Y Y Y Y 2015
NOTE: Submission of	false, err	oneous, or incomp	lete infor	mation may s	ubject the per	son signing t	his Report to t	the per	nalties of 2 U.S.C. §437g.
Office	•						.		
Use Only									EC FORM 3 Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Mark Greenberg for Congress

07 09 30 2015 01 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 15000.00 483079.86 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 22206.11 (from Line 20(d)) (c) Net Contributions (other than loans) 15000.00 460873.75 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 15009.59 1823048.92 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 15009.59 1823048.92 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 433.16 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 1856067.14 Schedule C and/or Schedule D).....

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)

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Write or Type Committee Name

Mark Greenberg for Congress	3
-----------------------------	---

Report Covering the Period: From: 07 01 2015 To: 09 30 2015

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
11.	CONTRIBUTIONS (other than loans) FROM:			
	(a) Individuals/Persons Other Than Political Committees			
	(i) Itemized (use Schedule A)	0.00	263631.11	
	(ii) Uniternized	0.00	30568.75	
	(iii) TOTAL of contributions from individuals	0.00	294199.86	
	(b) Political Party Committees	0.00	5500.00	
	(c) Other Political Committees (such as PACs)	0.00	26500.00	
	(d) The Candidate(e) TOTAL CONTRIBUTIONS	15000.00	156880.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	15000.00	483079.86	
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
	LOANS:			
	(a) Made or Guaranteed by the Candidate	0.00	1642900.00	
	(b) All Other Loans	0.00	0.00	
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	1642900.00	
	OFFSETS TO OPERATING			
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00	
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	1408.36	
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	15000.00	2127388.22	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17.	OPERATING EXPENDITURES	15009.59	1823048.92	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	
19.	LOAN REPAYMENTS:			
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	280000.00	
	(b) Of All Other Loans	0.00	0.00	
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	280000.00	
20.	REFUNDS OF CONTRIBUTIONS TO:			
	(a) Individuals/Persons Other Than Political Committees	0.00	22206.11	
	(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	22206.11	
21.	OTHER DISBURSEMENTS	0.00	0.00	
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	15009.59	2125255.03	
	III. CASH S	SUMMARY		
23.	CASH ON HAND AT BEGINNING OF REP	ORTING PERIOD	442.75	
4	TOTAL RECEIPTS THIS PERIOD (from Line	e 16, page 3)	15000.00	
5.	SUBTOTAL (add Line 23 and Line 24)		15442.75	
6.	TOTAL DISBURSEMENTS THIS PERIOD (f	from Line 22)	15009.59	
27.	CASH ON HAND AT CLOSE OF REPORTI	NG PERIOD	433.16	

Other (specify)

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

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

FOR LINE NUMBER: **PAGE** 5 OF 54 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 11d ITEMIZED RECEIPTS 11a 11b 11c Detailed Summary Page 12 13a 13b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Mark Greenberg for Congress Full Name (Last, First, Middle Initial) Mark Greenberg Date of Receipt Mailing Address 184 Fern Ave 31 2015 City State Zip Code Transaction ID: A75AF6785BCA44210BF6 CT 06759-2721 Litchfield FEC ID number of contributing Amount of Each Receipt this Period H0CT05150 federal political committee. 5000.00 Name of Employer Occupation campaign contribution Mark Greenberg Real Estate Real Estate Developer Receipt For: 2014 Election Cycle-to-Date Primary X General 77850.00 Other (specify) Full Name (Last, First, Middle Initial) Mark Greenberg Date of Receipt Mailing Address 184 Fern Ave 2015 City State Zip Code Transaction ID: A47F27A316F1C48E69CD Litchfield CT 06759-2721 FEC ID number of contributing Amount of Each Receipt this Period С H0CT05150 federal political committee. 10000.00 Name of Employer Occupation Real Estate Developer Campaign Contribution Mark Greenberg Real Estate Receipt For: 2014 Election Cycle-to-Date Primary ✓ General 87850.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General

15000.00

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	nedule(s) / of the	FOR LINE NUMBER: PAGE 6 OF 54 (check only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress			
Full Name (Last, First, Middle Initial) A. Admin. Of Unemployment Compensation	on		Date of Disbursement
Mailing Address PO Box 2940			08 28 2015
City State Hartford CT	Zip Code 06104-2940		Amount of Each Disbursement this Period 9.59
Purpose of Disbursement CT SUTA payroll tax		001	Transaction ID : BAC29E3F5B36241AAB00
Candidate Name		Category/ Type	Transaction ib . BA023E31 3B30241AAB00
Office Sought: House Disbursement For Senate Primar President Other			
State: District: Full Name (Last, First, Middle Initial)			
Dey Smith Steele, LLC Mailing Address 9 Depot Street Floor 2			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Milford CT	Zip Code 06460-3357		Amount of Each Disbursement this Period
Purpose of Disbursement Debt Repayment: legal fees		001	2000.00 Transaction ID : B790A132F26194AF68F3
Candidate Name		Category/ Type	
Office Sought: House Senate President State: Disbursement Formar Other			
Full Name (Last, First, Middle Initial)			
Dey Smith Steele, LLC			Date of Disbursement
Mailing Address 9 Depot Street Floor 2			09 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Zip Code 06460-3357		Amount of Each Disbursement this Period 2500.00
Debt Repayment: legal fees		001	
Candidate Name		Category/ Type	Transaction ID : B6AE399A9F56A49BBA3A
Office Sought: House Disbursement For Senate Primar Other			
State: District:			

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

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

ago., 20101000002011102			
SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate scl	y of the	FOR LINE NUMBER: PAGE 7 OF 54 (check only one)
	Detailed Summar	ry Page	20a 20b 20c 21
Any information copied from such Reports and Statements or for commercial purposes, other than using the name are			
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress			
Full Name (Last, First, Middle Initial) A. Theroux, Nowell & Stoughton, LLC			Date of Disbursement
Mailing Address 53 Peck Road			09 14 2015
City State Torrington CT	Zip Code 06790-6106		Amount of Each Disbursement this Period
Purpose of Disbursement Debt Repayment: accounting and software		001	3845.75
Candidate Name		Category/ Type	Transaction ID : BF629B22FC14A4534896
Office Sought: House Senate Prim President Disbursement Prim Othe		71.	
State: District:			
Full Name (Last, First, Middle Initial) Cooper Communications LLC			Date of Disbursement
Mailing Address 77 Ripley Hill Road			07 29 2015
City State Coventry CT	Zip Code 06238-1631		Amount of Each Disbursement this Period
Purpose of Disbursement Debt Repayment: Public relations consultant		001	1000.00 Transaction ID : BE7D0EE8DF5A94620984
Candidate Name		Category/ Type	
Office Sought: House Senate President State: Disbursement Prim Othe			
Full Name (Last, First, Middle Initial)			Data of Dishamanant
Cooper Communications LLC			Date of Disbursement
Mailing Address 77 Ripley Hill Road			09 14 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Coventry CT	Zip Code 06238-1631		Amount of Each Disbursement this Period
Purpose of Disbursement Debt Repayment: Public relations consultant	00230-1031		1000.00
Candidate Name		001 Category/ Type	Transaction ID : BC93026244BF84C1D848
Office Sought: House Disbursement Senate Prim President Othe		1906	
State: District:			

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

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

age# 201010000002011100			
SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sch		FOR LINE NUMBER: PAGE 8 OF 54 (check only one)
TEMPED DIODOTICEMENTO	Detailed Summar	y Page	20a 20b 20c 21
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an			
Mark Greenberg for Congress			
Full Name (Last, First, Middle Initial) Theroux, Nowell & Stoughton, LLC			Date of Disbursement
Mailing Address 53 Peck Road			07 29 2015
City State Torrington CT	Zip Code 06790-6106		Amount of Each Disbursement this Period
Purpose of Disbursement Debt Repayment: accounting and software Candidate Name		001	1000.00 Transaction ID : B796CC69E41014F7E94B
Office Sought: House Disbursement F	For: 2014	Category/ Type	_
Senate Prima			
State: District: Full Name (Last, First, Middle Initial)			
Theroux, Nowell & Stoughton, LLC			Date of Disbursement
Mailing Address 53 Peck Road	7: 0		09 14 2015
City State Torrington CT Purpose of Disbursement	Zip Code 06790-6106		Amount of Each Disbursement this Period
Debt Repayment: accounting and software Candidate Name		001	Transaction ID : B98381396A7FE40B7BC2
		Category/ Type	
Office Sought: House Disbursement F	- ·		
Full Name (Last, First, Middle Initial)			Data of Dishamanant
_{C.} William J Evans			Date of Disbursement
Mailing Address 325 Celia Drive			07 31 2015
City State Wolcott CT	Zip Code 06705-3153		Amount of Each Disbursement this Period
Purpose of Disbursement Debt Repayment: lodging		002	1000.00
Candidate Name		002 Category/ Type	Transaction ID : B5ACBADA4D19E4EE5921
Office Sought: House Disbursement F Senate Prima Othor	ary Seneral		
State: District: Other	(specify)		

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

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 54 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

19b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Mark Greenberg for Congress Full Name (Last, First, Middle Initial) Date of Disbursement William J Evans 2015 Mailing Address 325 Celia Drive 09 City State Zip Code Amount of Each Disbursement this Period CT Wolcott 06705-3153 Purpose of Disbursement Debt Repayment: lodging 1500.00 002 Transaction ID: B5CAB490108724ABA9EE Candidate Name Category/ Type Office Sought: House Disbursement For: **X** General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 1500.00 SUBTOTAL of Disbursements This Page (optional)..... 15009.59

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

Use separate schedule(s)

FOR LINE NUMBER: (check only one)

PAGE

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for each category of the **X** 13a Detailed Summary Page 13b Transaction ID: CFEBC2E2425BC4BC5823 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 300000.00 0.00 300000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D31 ^M08^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 300000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE 11

X 13a 13b

OF

		Detailed Summary Pa	age	13b
NAME OF COMMITTEE (In Full)		Transa	action ID : C55D484FE54D34017B0	00
Mark Greenberg for Congress				
LOAN SOURCE Full Name (Last, First,	, Middle Initial)	[PERSONAL FUNDS]	Election: 2014	
Mark Greenberg			Primary General	
Mailing Address 184 Fern Ave			General Other (specify) ▼	
City	State ZIP Co	do		
City Litchfield	CT 06759-:			
Original Amount of Loan	Cumulative Payment To	Date Ba	lance Outstanding at Close of This	3 Period
65000.00		0.00	65000.0)0
TERMS Date Incurred	Date Due	Interest Ra	ite Secured:	
M 10 M / D 23 D / Y Ž014 Y	M M / D D / Y	Ňone Y	% (apr) Yes	X _{No}
List All Endorsers or Guarantors (if ar	ny) to Loan Source		165	INO
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		1
City Stat	te ZIP Code	Guaranteed Outstanding:	7	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		1
City Stat	te ZIP Code	Guaranteed Outstanding:	9 9 9 9	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		1
City Stat	te ZIP Code	Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·	
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City Stat	te ZIP Code	Guaranteed Outstanding:	7	
SUBTOTALS This Period This Page (option			65000.0)0
TOTALS This Period (last page in this line	oniy)	••••••••••••••••••••••••••••••••••••••		
Carry outstanding balance only to LINE 3,	, Schedule D, for this line. If	no Schedule D, carry for	rward to appropriate line of Sum	mary.

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

PAGE FOR LINE NUMBER: (check only one)

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X	13a
	13b

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Transaction ID: CC474E6A9D9E145438A5 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M06^M 06 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		Detailed Garrinary 1 8	13b
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress		Transa	ection ID : C9CC59E63697E486EB69
LOAN SOURCE Full Name (Last, First, Middle Mark Greenberg	le Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 184 Fern Ave			Other (specify)
City	State ZIP Cod	е	
Litchfield	CT 06759-27	721	
Original Amount of Loan	Cumulative Payment To [Oate Ba	lance Outstanding at Close of This Period
Date Incurred M 08 / D 15 / Y 2014 Y		Interest Ra	
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)		Name of Employer	
1. Full Name (Last, First, Middle Illida)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZII 0000	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State		Guaranteed Outstanding:	9
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only).			12500.00
Carry outstanding balance only to LINE 3, Schee	dule D. for this line. If n	o Schedule D. carry for	ward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

			130
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress		Transac	tion ID : CCB5478271BD04BCA941
LOAN SOURCE Full Name (Last, First, Mic Mark Greenberg Mailing Address 184 Fern Ave	ddle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General ✓ Other (specify) ▼ Convention2014
City	State ZIP Co	de	
Litchfield	CT 06759-	2721	
Original Amount of Loan 17500.00	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
TERMS		,	<u> </u>
Date Incurred M05 ^M / D03 ^D / Y 2013 Y	Date Due	None Interest Rate	
List All Endorsers or Guarantors (if any) t	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 2
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:	7
SUBTOTALS This Period This Page (optional).		<u> </u>	17500.00
TOTALS This Period (last page in this line only	/)		
Carry outstanding balance only to LINE 3, Sci	nedule D, for this line. If	no Schedule D, carry forw	vard to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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X 13a I

PANS			Detailed Summary Pag	ge (check only one)
AME OF COMMITTEE (In Full)			Transac	ction ID : CD07EFD888A3B4648AE3
lark Greenberg for Cong	ress			
LOAN SOURCE Full Name (La	st, First, Midd	le Initial)	[PERSONAL FUNDS]	Election: 2014 Primary
Mark Greenberg				General
Mailing Address 184 Fern Ave				X Other (specify) ▼ Convention2014
City	S	state ZIP Co	de	
Litchfield		CT 06759-2	2721	
Original Amount of Loan		Cumulative Payment To	Date Bala	ance Outstanding at Close of This Perio
7 7	000.00		0.00	5000.00
TERMS Date Incurred		Date Due	Interest Rate	e Secured:
M11M / 26 ^D / Y 20	13 Y	M / D D / Y	Ňone Y 0.00	% (apr) Yes
List All Endorsers or Guaranto		Loan Source		
1. Full Name (Last, First, Midd	le Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
UBTOTALS This Period This Pag	e (optional)			5000.00
OTALS This Period (last page in	this line only).			
arry outstanding balance only to	LINE 3. Schee	dule D. for this line. If	no Schedule D. carry for	ward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		Detailed Garrinary Fag	13b
ME OF COMMITTEE (In Full)	2	Transac	ction ID : CB60CC071A86C4A02B17
lark Greenberg for Congres			
LOAN SOURCE Full Name (Last, F	irst, Middle Initial)	[PERSONAL FUNDS]	Election: 2014
Mark Greenberg			Primary General
Mailing Address			Other (specify) ▼
184 Fern Ave			Convention2014
City	State ZI	P Code	
Litchfield	CT 0	6759-2721	
Original Amount of Loan	Cumulative Payme	ent To Date Bala	ance Outstanding at Close of This Period
15000.	00	0.00	15000.00
7 7 7			9 9 9 9
TERMS Date Incurred	Date	Due Interest Rate	e Secured:
M 09 / 27 / Y 2013	Y M M / D D /	None 0.00	
03 27 2013		None	% (apr) Yes No
List All Endorsers or Guarantors (i	f any) to Loan Source		
1. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Init	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	, ,
3. Full Name (Last, First, Middle Init	al)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed	
Oity	State ZII Gode	Outstanding:	9
4. Full Name (Last, First, Middle Init	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	
UBTOTALS This Period This Page (op			15000.00
OTALS This Period (last page in this	ine only)	·····	
carry outstanding balance only to LIN	E 3 Schedule D for this lin	ne If no Schedule D. carry for	ward to appropriate line of Summary

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

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Transaction ID: CD4093CB301954FA8B73 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 04 ^M06^M 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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			Detailed Summary Pa	age 13b
AME OF COMMITTEE (In Ful			Transa	ction ID : CF8A2925E3D2E4806B3C
Mark Greenberg for C				
LOAN SOURCE Full Name	e (Last, First, Midd	le Initial)	[PERSONAL FUNDS]	Election: 2012
Mark Greenberg				Primary General
Mailing Address 184 Fern Ave				Other (specify) ▼
City	5	State ZIP	Code	
Litchfield		CT 067	759-2721	
Original Amount of Loan		Cumulative Paymen	t To Date Bal	ance Outstanding at Close of This Period
2	75000.00	2	0.00	75000.00
TERMS Date Incurre	·d	Date [Due Interest Rat	te Secured:
M07 ^M / D25 ^D / Y	ž01ž ^Y	M / D D /	Y None Y 0.0	0 % (apr) Yes No
List All Endorsers or Gua	rantors (if any) to	Loan Source		
1. Full Name (Last, First, I	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	7
2. Full Name (Last, First, M	fiddle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9 9
3. Full Name (Last, First, M	fiddle Initial)		Name of Employer	
Mailing Address			Occupation	
	_		Amount	
City	State	ZIP Code	Guaranteed Outstanding:	yy
4. Full Name (Last, First, M	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9 9 9 9
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Carry outstanding balance or	ly to LINE 3 Sche	dule D. for this line	. If no Schedule D. carry for	ward to appropriate line of Summary

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Transaction ID: CECBA7AF2579C4725B29 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 235000.00 105000.00 130000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M06^M ^D30 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 130000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: CA2C1E440008A41FDB5E NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 15000.00 0.00 15000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M06^M ^D16 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 15000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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AME OF COMMITTEE (In Full)		Transa	action ID : C0528A3D351754D3BB6C	
Mark Greenberg for Congress				
LOAN SOURCE Full Name (Last, First, Middle I Mark Greenberg	nitial)	[PERSONAL FUNDS]	Election: 2014 Primary General	
Mailing Address 184 Fern Ave			Other (specify) ▼ Convention2014	
City State	e ZIP Coc	le		
Litchfield CT	06759-2	721		
Original Amount of Loan Cur	mulative Payment To	Date Ba	alance Outstanding at Close of This Per	riod
TERMS Date Incurred	Date Due	Interest Ra	ate Secured:	
M 11 M / D 13 D / Y Ž01 Š Y	/ D D / Y	Ňone Y 0.0	00 % (apr)	No
List All Endorsers or Guarantors (if any) to Loa	an Source	Name of Family		
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		-
City State ZI	P Code	Amount Guaranteed Outstanding:	7	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State ZI	P Code	Amount Guaranteed Outstanding:	7 7 7	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State ZI	P Code	Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State ZI	P Code	Amount Guaranteed Outstanding:	9 9 9	
SUBTOTALS This Period This Page (optional)			8000.00]
TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule			rward to appropriate line of Summar	

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		Detailed Garrinary Fa	13b
NAME OF COMMITTEE (In Full)		Transa	ction ID : C71137021C269419383D
Mark Greenberg for Congress			
LOAN SOURCE Full Name (Last, First, Mark Greenberg	Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 184 Fern Ave			Other (specify) ▼ Convention2014
City	State ZIP Cod	de	
Litchfield	CT 06759-2	2721	
Original Amount of Loan 7500.00	Cumulative Payment To	Date Bal	ance Outstanding at Close of This Period
Date Incurred Mo6 / D18 / Y 2013 Y List All Endorsers or Guarantors (if an	Date Due	None Interest Rat	
Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	9 9 9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 9
SUBTOTALS This Period This Page (option	nal)	>	7500.00
TOTALS This Period (last page in this line	only)		
Carry outstanding balance only to LINE 3,	Schedule D. for this line. If	no Schedule D. carry for	ward to appropriate line of Summary.

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Transaction ID: CBA924F3BC0384AB1B4A NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) \blacktriangledown 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 95000.00 0.00 95000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 13^D ^M08^M Ž012 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 95000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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		Detailed Summary Pa	ge 13b
NAME OF COMMITTEE (In Full)		Transa	ction ID : CFABA2000D23841ACB3D
Mark Greenberg for Congress			
LOAN SOURCE Full Name (Last, First, Midd Mark Greenberg	lle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary
Mailing Address 184 Fern Ave			☐ Ceneral Other (specify) ▼
City	State ZIP Code	e	l .
Litchfield	CT 06759-27	721	
Original Amount of Loan	Cumulative Payment To D	Date Bal	ance Outstanding at Close of This Period
150000.00	2	0.00	150000.00
TERMS Date Incurred	Date Due	Interest Rat	e Secured:
M 10 M / D 09 D / Y 2014 Y	M / D D / Y	None 0.0	0 % (apr) Yes No
List All Endorsers or Guarantors (if any) to			
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
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:	9 1 9 1 9 1
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only)			150000.00
Carry outstanding balance only to LINE 3 Saba	dula D. fau thia line. If w	o Sobodulo D. com: for	ward to appropriate line of Cumpan.

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Transaction ID: CAD835A72DC2043B4B84 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^м 12^м ^D 17 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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			130
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress		Transac	ction ID: C5433DBD61BFC46F3B52
LOAN SOURCE Full Name (Last, First, Middle I Mark Greenberg Mailing Address 184 Fern Ave	nitial)	[PERSONAL FUNDS]	Election: 2014 Primary General Other (specify) ▼
City State Litchfield C7			
Original Amount of Loan Cui	mulative Payment To	Date Bala	ance Outstanding at Close of This Period
Date Incurred M 10 / 28 / Y 2014 Y List All Endorsers or Guarantors (if any) to Loa		None Y 0.00	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State ZI	P Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State ZI	P Code	Amount Guaranteed Outstanding:	9 9
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State ZI	P Code	Amount Guaranteed Outstanding:	9 9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State ZI	P Code	Amount Guaranteed Outstanding:	9 9 9
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Transaction ID: C608ACCA87AF942D485C NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 7500.00 0.00 7500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= м} 02 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 7500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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NAME OF COMMITTEE (In Full) Mark Greenberg for Congress		Transa	ction ID : C8120BECF32A9412997B	
LOAN SOURCE Full Name (Last, First, Midd Mark Greenberg Mailing Address 184 Fern Ave	dle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General Other (specify)	
	State ZIP Co	ado.	Convention2014	
City Litchfield	CT 06759-			
Original Amount of Loan	Cumulative Payment To	Date Bala	ance Outstanding at Close of This Period	
Date Incurred Mo9M / D16D / Y 2013 Y List All Endorsers or Currenters (if end) to		Interest Rat None 9 0.00		
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	Loan Source	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	7	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	7	
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	7	
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3, Sche	edule D, for this line. If	no Schedule D, carry for	ward to appropriate line of Summary.	

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Transaction ID: C538F7BD086F14626BF2 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 15000.00 0.00 15000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 23 ^M06^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 15000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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AME OF COMMITTEE (In Full)				Transaction	ID : CEF6B47203	2C5458B8	F5
Mark Greenberg for Congre	ess ————						
LOAN SOURCE Full Name (Last	First, Middle	Initial)	[PERSONAL I	FUNDS] EI	ection: 2014		
Mark Greenberg					Primary General		
Mailing Address 184 Fern Ave					Other (specify)	V	
City	Stat	te ZIP C	Code	1			
Litchfield	C	T 0675	9-2721				
Original Amount of Loan	Cu	ımulative Payment	To Date	Balance	Outstanding at C	ose of This	s Perioc
1000	00.00		0.00			100000.0	00
TERMS Date Incurred		Date Du	ie In	terest Rate		Secured:	
M 09 / D 30 / Y 2012	M N	/ D D /	None	0.00	% (apr)	Yes	X No
List All Endorsers or Guarantors	s (if any) to Lo	an Source					
1. Full Name (Last, First, Middle	Initial)		Name of Emplo	oyer			
Mailing Address			Occupation				
City	State Z	IP Code	Amount Guaranteed Outstanding:			4]
2. Full Name (Last, First, Middle	Initial)		Name of Emplo	oyer			
Mailing Address			Occupation				
City	State Z	IP Code	Amount Guaranteed Outstanding:	9		4]
3. Full Name (Last, First, Middle	Initial)		Name of Emplo	yer			
Mailing Address			Occupation				
City	State Z	IP Code	Amount Guaranteed Outstanding:	,		-	
4. Full Name (Last, First, Middle	Initial)		Name of Emplo	oyer			
Mailing Address			Occupation				
City	State Z	IP Code	Amount Guaranteed Outstanding:	7		70]
SUBTOTALS This Period This Page OTALS This Period (last page in the				>	9 9	100000.	00
Carry outstanding balance only to I	INF 3. Schedul	e D. for this line	If no Schedule D	carry forward	I to appropriate li	ne of Sum	

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		Detailed Summary Pag	ge 13b
AME OF COMMITTEE (In Full)		Transac	ction ID : C2530A505B6DB44D089F
Mark Greenberg for Congress			
LOAN SOURCE Full Name (Last, First, Mi Mark Greenberg	ddle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 184 Fern Ave			Other (specify) ▼ Convention2014
City	State ZIP Co	de	
Litchfield	CT 06759-	2721	
Original Amount of Loan	Cumulative Payment To	Date Bala	ance Outstanding at Close of This Period
TERMS			
Date Incurred Mo1 ^M / D28 ^D / Y 2014 Y	Date Due	None O.00	
List All Endorsers or Guarantors (if any)	to Loan Source	I Name of Franksia	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
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Carry outstanding balance only to LINE 3, Sc	hedule D, for this line. If	no Schedule D, carry forv	ward to appropriate line of Summary.

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Transaction ID: C9BDE8AB0A22C4E7092B NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 200000.00 0.00 200000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 15 ^M 10^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 200000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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NAME OF COMMITTEE (In Full)		Transa	action ID : CC107E489D0E64C908	33D
Mark Greenberg for Congress				
LOAN SOURCE Full Name (Last, First,	Middle Initial)	[PERSONAL FUNDS]	Election: 2014	
Mark Greenberg			Primary	
Mailing Address			General Other (appoint)	
184 Fern Ave			Other (specify)	
City	State ZIP Cod	de		
Litchfield	CT 06759-2	2721		
Original Amount of Loan	Cumulative Payment To	Date Ba	lance Outstanding at Close of Th	is Period
21000.00		0.00	21000.	00
21000.00		0.00	21000.	.00
TERMS Date Incurred	Date Due	Interest Ra	te Secured:	
M 11 M / D 04 D / Y 2014 Y	M M / D D / Y	Ňoně 0.0		
11 04 2014		None	% (apr)	No
List All Endorsers or Guarantors (if an	ny) to Loan Source		100	
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City Stat	e ZIP Code	Guaranteed Outstanding:	7 7	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City Stat	e ZIP Code	Guaranteed		7
		Outstanding:	7	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		_
City Stat	e ZIP Code	Guaranteed		
		Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City Stat	e ZIP Code	Guaranteed Outstanding:	7 7 7	
SUPTOTALS This Deviced This Degre (entire	201)		21000	00
SUBTOTALS This Period This Page (option			21000.	.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: CFD73008F64174859A74 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2012 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 500000.00 2600.00 212400.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D31 ^M 03^M Ž012 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 212400.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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AME OF COMMITTEE (In Full)			Trans	action	ID : CD1D81F253F7940	C4188B
Mark Greenberg for Congre	ess					
LOAN SOURCE Full Name (Last	, First, Middle	e Initial)	[PERSONAL FUNDS]		ction: 2014	
Mark Greenberg					Primary General	
Mailing Address 184 Fern Ave					Other (specify)	
City	S	tate ZIP C	ode			
Litchfield		CT 06759	9-2721			
Original Amount of Loan	(Cumulative Payment T	o Date B	alance	Outstanding at Close o	f This Period
500	00.00	9	0.00		5	000.00
TERMS Date Incurred		Date Due	e Interest R	ate	Secu	red:
M06 ^M / D03 / Y 2014	Y	M / D D / Y		.00	% (apr)	Yes No
List All Endorsers or Guarantors	s (if any) to I	_oan Source				140
1. Full Name (Last, First, Middle	Initial)		Name of Employer			
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	7		
2. Full Name (Last, First, Middle	Initial)		Name of Employer			
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	7		
3. Full Name (Last, First, Middle	Initial)		Name of Employer			
Mailing Address			Occupation			
			Amount	-		
City	State	ZIP Code	Guaranteed Outstanding:	7		
4. Full Name (Last, First, Middle	Initial)		Name of Employer			
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	7	9	
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ME OF COMMITTEE (In Full)	_	Transac	ction ID : CF9D2816C62954C8CB87
lark Greenberg for Congress	5		
LOAN SOURCE Full Name (Last, Find Mark Greenberg	rst, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary
Mailing Address 184 Fern Ave			General ☐ Other (specify) ▼ Convention2014
City	State ZIP C	code	
Litchfield		9-2721	
Original Amount of Loan	Cumulative Payment T	o Date Bala	ance Outstanding at Close of This Period
7500.0	00	0.00	7500.00
TERMS Date Incurred	Date Due	e Interest Rate	e Secured:
^M 02 ^M / ^D 06 ^D / Y Ž01Ă	Y M M / D D / Y	None Y 0.00	
List All Endorsers or Guarantors (if	any) to Loan Source		
1. Full Name (Last, First, Middle Init	tial)	Name of Employer	
Mailing Address		Occupation	
City S	State ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	, ,
3. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	, , , , , , , , , ,
4. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	9 9 9
UBTOTALS This Period This Page (op	tional)	<u> </u>	7500.00
OTALS This Period (last page in this I	ine only)	·····	, ,
arry outstanding balance only to LINE	3. Schedule D. for this line. I	f no Schedule D. carry for	ward to appropriate line of Summary.

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Transaction ID: CA255D27209C6400EB5A NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 8000.00 0.00 8000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M08^M 06 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 8000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: CB3C30926CC3D4713ACF NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) \blacktriangledown 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 650000.00 1000.00 79000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M06^M ^D30 Ž012 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 79000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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ME OF COMMITTEE (In Full)		Transac	ction ID : C762400101B594EFB9BE
ark Greenberg for Congress			
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	[PERSONAL FUNDS]	Election: 2014
Mark Greenberg			Primary
Mailing Address			General ✓ Other (specify) ▼
184 Fern Ave			Convention2014
City	State ZIP Co	de	
Litchfield	CT 06759-	2721	
Original Amount of Loan	Cumulative Payment To	Date Bala	ance Outstanding at Close of This Perio
97400.00	1	0.00	96000.00
07.100.00		, , , ,	, , ,
TERMS Date Incurred	Date Due	Interest Rate	e Secured:
M ₀₃ M / D ₀₃ D / Y 2014 Y	M M / D D / Y	None 0.00	
03 03 2014		None	% (apr) Yes N
List All Endorsers or Guarantors (if any) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	9 9
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed	
		Outstanding:	7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	, ,
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13b Transaction ID: CC4F9D300B97E418CB4B NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5500.00 0.00 5500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 04 ^м 12^м 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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AME OF COMMITTEE (In Full) Mark Greenberg for Congre	ss		•	Transaction	ID : CE3309364	1F8544E79E	37
LOAN SOURCE Full Name (Last,	First, Middle Initial)		[PERSONAL FU	NDS] Ele	ection: 2014		
Mark Greenberg				X	Primary General		
Mailing Address 184 Fern Ave					Other (specify)	▼	
City	State	ZIP Cod	9				
Litchfield	СТ	06759-27	721				
Original Amount of Loan	Cumulative	Payment To D	Date	Balance	Outstanding at (Close of Thi	s Period
500	0.00	, ,	0.00			5000.	00
TERMS Date Incurred		Date Due	Inter	est Rate		Secured:	
M 08	M M / D	D / Y	Ňone Y	0.00	% (apr)	Yes	× No
List All Endorsers or Guarantors	(if any) to Loan Sou	rce				Tes	INO
1. Full Name (Last, First, Middle	Initial)		Name of Employe	r			
Mailing Address			Occupation				
City	State ZIP Code)	Amount Guaranteed Outstanding:	,			
2. Full Name (Last, First, Middle In	nitial)		Name of Employe	r			
Mailing Address			Occupation				
			Amount				_
City	State ZIP Code	7	Guaranteed Outstanding:	7	7		
3. Full Name (Last, First, Middle In	nitial)		Name of Employe	r			
Mailing Address			Occupation				
City	State ZIP Code		Amount Guaranteed				1
-		,	Outstanding:	7	7		
4. Full Name (Last, First, Middle In	nitial)		Name of Employe	r			
Mailing Address			Occupation				
City	State ZIP Code	•	Amount Guaranteed Outstanding:]
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		Detailed Gairi	13b
AME OF COMMITTEE (In Full)			Transaction ID: C71BF6E42B9164E6D9B3
lark Greenberg for Congres			
LOAN SOURCE Full Name (Last, I Mark Greenberg	First, Middle Initial)	[PERSONAL F	UNDS] Election: 2014 Primary General
Mailing Address 184 Fern Ave			Other (specify) ▼ Convention2014
City	State	ZIP Code	
Litchfield	СТ	06759-2721	
Original Amount of Loan	Cumulative Pay	ment To Date	Balance Outstanding at Close of This Period
12000	00	0.00	12000.00
TERMS Date Incurred	С	ate Due Inte	erest Rate Secured:
M ₁₂ M / D ₁₁ D / Y Ž013	Y M M / D D	/ Y None Y	0.00 % (apr) Yes No
List All Endorsers or Guarantors (f any) to Loan Source		
1. Full Name (Last, First, Middle Ir	itial)	Name of Employ	er
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Ini	ial)	Name of Employ	er
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Ini	ial)	Name of Employ	er
•	, 	. ,	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
4. Full Name (Last, First, Middle Ini	tial)	Name of Employ	er
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	9 9 9 9 9
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arry outstanding balance only to LIN	E 3, Schedule D, for this	s line. If no Schedule D. c	arry forward to appropriate line of Summary.

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Transaction ID: C4C5EFE472C5D4BD6A5D NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 19^D ^M08^M 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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13b Transaction ID: CA5403816357B4746BD4 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D21 ^D ^M 05^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: C80BBC0D174A54CF79D4 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 33000.00 0.00 33000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 29 ^M 10^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 33000.00 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.

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		Detailed Garrinary 1 a	13b
NAME OF COMMITTEE (In Full) Mark Greenberg for Congress		Transa	ction ID : CD4115B528CF14546B50
LOAN SOURCE Full Name (Last, First, Mice Mark Greenberg	ddle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary
Mailing Address 184 Fern Ave			General Other (specify) ▼ Convention2014
City	State ZIP Cod	e	
Litchfield	CT 06759-2	721	
Original Amount of Loan 6000.00	Cumulative Payment To I	Date Bal	ance Outstanding at Close of This Period
Date Incurred Mo2 ^M / P11 / Y 2014 Y		Interest Rat Ňoně ^Y 0.0	
List All Endorsers or Guarantors (if any) t 1. Full Name (Last, First, Middle Initial)	o Loan Source	Name of Employer	
1. Full Name (Last, First, Middle Illitial)			
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1
SUBTOTALS This Period This Page (optional).			6000.00
TOTALS This Period (last page in this line only	/)	·····	, ,
Carry outstanding balance only to LINE 3, Sch	nedule D, for this line. If n	o Schedule D, carry for	ward to appropriate line of Summarv.

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Transaction ID: C5567BFAB217D40639A2 NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address X Other (specify) 184 Fern Ave Convention2014 City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 12500.00 0.00 12500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 04 ^M 09^M 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 12500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Detailed Summary Page Transaction ID: C1EF3F3C5664D40EF8FF NAME OF COMMITTEE (In Full) Mark Greenberg for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mark Greenberg General Mailing Address Other (specify) 184 Fern Ave City State ZIP Code CT 06759-2721 Litchfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 171400.00 175000.00 3600.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M 03 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 3600.00 1811500.00 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.

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 49 OF FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)

Mark Greenberg for C	Congress	
A. Full Name (Last, First, Middle Initial) of Dr. Theroux, Nowell & Stoughton,	Nature of Debt (Purpose): accounting and software	
Mailing Address 53 Peck Road		
City State Torrington	Zip Code CT 06790-6106	
Outstanding Balance Beginning This Period 2154.25		Transaction ID : DF899CA4A61054B5598E
Amount Incurred This Period 0.00	Payment This Period	Outstanding Balance at Close of This Period 4.25 0.00
B. Full Name (Last, First, Middle Initial) of De Dey Smith Steele, LLC	ebtor or Creditor	Nature of Debt (Purpose): legal fees
Mailing Address 9 Depot Street Floor 2		
City State Milford	Zip Code CT 06460-3357	
Outstanding Balance Beginning This Period 12868.75		Transaction ID: DB6430B895C0F48A7A1D
Amount Incurred This Period 0.00	Payment This Period 450	Outstanding Balance at Close of This Period 0.00 8368.75
C. Full Name (Last, First, Middle Initial) of D Watertown Main Street LLC	ebtor or Creditor	Nature of Debt (Purpose): rent headquarters
Mailing Address PO Box 28		
City Watertown	State Zip Code CT 06795-0028	
Outstanding Balance Beginning This Period		Transaction ID: D366E903FA4464DD7A4D
Amount Incurred This Period 0.00	Payment This Period	Outstanding Balance at Close of This Period 0.00 1250.00
1) SUBTOTALS This Period This Page (optional	al)	9618.75
2) TOTALS This Period (last page this line num	nber only)	
3) TOTAL OUTSTANDING LOANS from Sched	lule C (last page only)	>
4) ADD 2) and 3) and carry forward to appropri	riate line of Summary Page (last page	only) ►

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 50 OF FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Theroux, Nowell & Stoughton, LLC		Nature of Debt (Purpose): accounting and software	
Mailing Address 53 Peck Road			
City State	Zip Code		
Torrington	СТ	06790-6106	
Outstanding Balance Beginning This Period			Transaction ID : D6507C36E07BA4CDB916
7280.50			
Amount Inquired This Deried	De	wmant This Daried	Outstanding Palance at Close of This Pariod
Amount Incurred This Period	Pa	ayment This Period	Outstanding Balance at Close of This Period
0.00		3845.75	3434.75
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Cooper Communications LLC			Public relations consultant
Mailing Address 77 Ripley Hill Road			
City State	Zip Code	}	
Coventry	CT	06238-1631	
Outstanding Balance Beginning This Period			Transaction ID : D5851A390930444CA900
2943.50			
Amount Incurred This Period	De	ayment This Period	Outstanding Balance at Close of This Period
	Га		
0.00		2000.00	943.50
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of Debt (Purpose):
Dey Smith Steele, LLC			legal fees
Mailing Address 9 Depot Street Floor 2			
City	State	Zip Code	
Milford	CT	06460-3357	
Outstanding Balance Beginning This Period			Transaction ID: D2039E0041DC549E5B4F
1625.00			
9 9	Б.	and This Build	O tabantan Balanca at Oleman (This Build
Amount Incurred This Period	Pa	syment This Period	Outstanding Balance at Close of This Period
0.00		0.00	1625.00
			6003.25
SUBTOTALS This Period This Page (optional)			33320
TOTALS This Period (last page this line number	only)		
TOTAL OUTSTANDING LOANS from Schedule 0	C (last page o	only)	
		nary Page (last page only)	-

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 51 OF
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NAME OF COMMITTEE (In Full)

Mark Greenberg for Congress

1ark Greenberg for Co	ngress		
A. Full Name (Last, First, Middle Initial) of Debto Cooper Communications LLC	or or Creditor		Nature of Debt (Purpose): Public Relations Consultant
Mailing Address 77 Ripley Hill Road			
City State Coventry	Zip Code CT	06238-1631	
Outstanding Balance Beginning This Period			Transaction ID : DF28B3AD16148440BBDB
Amount Incurred This Period	Pavr	nent This Period	Outstanding Balance at Close of This Period
0.00	i dyi	0.00	
B. Full Name (Last, First, Middle Initial) of Debto Watertown Main Street LLC	r or Creditor		Nature of Debt (Purpose): Office Rent
Mailing Address PO Box 28			
City State Watertown	Zip Code CT	06795-0028	
Outstanding Balance Beginning This Period 1250.00			Transaction ID : DF2520AB50E9F4DBAB7E
Amount Incurred This Period	Payr	nent This Period	Outstanding Balance at Close of This Period
0.00	7	0.00	1250.00
C. Full Name (Last, First, Middle Initial) of Debto Jamestown Associates	or or Creditor		Nature of Debt (Purpose): broadcast TV Advertising
Mailing Address 5 Mapleton Road Suite 300			
City Princeton	State NJ	Zip Code 08540-9646	
Outstanding Balance Beginning This Period 1275.00			Transaction ID: D5108054CCF8F43D189A
Amount Incurred This Period	Payr	nent This Period	Outstanding Balance at Close of This Period
0.00	7	0.00	1275.00
SUBTOTALS This Period This Page (optional)			6246.75
TOTALS This Period (last page this line number	only)		>
TOTAL OUTSTANDING LOANS from Schedule	C (last page on	y)	>
ADD 2) and 3) and carry forward to appropriate	e line of Summa	ry Page (last page only)	>

1)

2)

3)

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Excluding Loans

(Use separate schedule(s) for each numbered line)

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NAME OF COMMITTEE (In Full)	
Mark Greenberg for Congress	

wark Greenberg for Cor	_ _	10.1.10
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose): direct mail advertising design fee
Red Maverick Media, LLC		and than advertising design rec
Mailing Address 403 N 2nd Street		
Suite 2		_
City State	Zip Code	
Harrisburg	PA 17101-1377	
Outstanding Balance Beginning This Period		Transaction ID : D91D6AEC9EBF945589B0
200.00		
200.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	200.00
P. Full Name (Last First Middle Initial) of Debter (or Craditar	Nature of Daht (Durpose):
B. Full Name (Last, First, Middle Initial) of Debtor of		Nature of Debt (Purpose): accounting services
Theroux, Nowell & Stoughton, LLC	•	
Mailing Address 53 Peck Road		1
City State	Zip Code	-
Torrington	CT 06790-6106	
-	23.00 0.00	
Outstanding Balance Beginning This Period		Transaction ID : D5C60BE2B34E644C09E8
10730.50		
Associated This Desired	December This Decised	Outstanding Delayer at Olege of This Deviced
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	10730.50
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
Dey Smith Steele, LLC		legal fees
Mailing Address 9 Depot Street		-
Floor 2		
City	State Zip Code	
Milford	CT 06460-3357	
Outstanding Balance Beginning This Period		Transaction ID : DE213B92F513F4A848DC
213.85		
, , , ,		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	213.85
SUBTOTALS This Period This Page (optional)	>	11144.35
TOTALS This Period (last page this line number of	only)	
TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	
ADD 2) and 3) and carry forward to appropriate I	ine of Summary Page (last page only)	7 7 7

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 53 OF FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)	
Mark Greenberg for	Congress

Ma	irk Greenberg for C	ongress	
A.	Full Name (Last, First, Middle Initial) of Deb heroux, Nowell & Stoughton, I	otor or Creditor	Nature of Debt (Purpose): accounting services
Mail	ling Address 53 Peck Road		
City	State	Zip Code CT 06790-6106	
0	outstanding Balance Beginning This Period 4487.50		Transaction ID : DB2977F1C21BB4D45991
	Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4487.50
Т	Full Name (Last, First, Middle Initial) of Debi Theroux, Nowell & Stoughton, I ling Address 53 Peck Road		Nature of Debt (Purpose): accounting services
City	State	Zip Code CT 06790-6106	
	outstanding Balance Beginning This Period 2568.75 Amount Incurred This Period 0.00	Payment This Period 0.00	Transaction ID: DE61E39151183463985A Outstanding Balance at Close of This Period 2568.75
	Full Name (Last, First, Middle Initial) of Deb Villiam J Evans	otor or Creditor	Nature of Debt (Purpose): lodging
Mail	ling Address 325 Celia Drive		
City Wo	lcott	State Zip Code CT 06705-3153	
0	outstanding Balance Beginning This Period 4575.29		Transaction ID : DBC33491941414C19B07
	Amount Incurred This Period 0.00	Payment This Period 2500.00	Outstanding Balance at Close of This Period 2075.29
1) SU	BTOTALS This Period This Page (optional)		9131.54
2) TO	TALS This Period (last page this line numb	per only)	>
3) TO	TAL OUTSTANDING LOANS from Schedul	le C (last page only)	>
4) AD	DD 2) and 3) and carry forward to appropria	ate line of Summary Page (last page only)	>

NAME OF COMMITTEE (In Full)

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 54 OF FOR LINE NUMBE (check only one)

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Λ	Mark Greenberg for Congress			
	A. Full Name (Last, First, Middle Initial) of Debtor of Theroux, Nowell & Stoughton, LLC	Nature of Debt (Purpose): accounting and software		
-	Mailing Address 53 Peck Road			
	City State Torrington	Zip Code CT 06790-6106		
	Outstanding Balance Beginning This Period 0.00		Transaction ID : DEC0BE4A91E7E4F16948	
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
	2422.50	0.00	2422.50	
Ī	. 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	
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mailing Address		Nature of Debt (Purpose):	
	City	State Zip Code		
	Outstanding Balance Beginning This Period Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
		7 7 7	9 1 9 1 9	
1)	SUBTOTALS This Period This Page (optional)		2422.50	
2)	TOTALS This Period (last page this line number only)		44567.14	
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)		1811500.00	
4)	ADD 2) and 3) and carry forward to appropriate li	1856067.14		