FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
12 APR 15 AM 11:25
Office Use Only

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

FRIENDS OF CHRIS GARNER FOR SENATE

ADDRESS (number and street) ▼ 465 CENTURY VISTA DR.

☐ Check if different than previously reported. (ACC)

CITY ▲ ARNOLD STATE ▲ MD ZIP CODE ▲ 21012-

2. FEC IDENTIFICATION NUMBER ▼ C00505628

3. IS THIS REPORT ☐ NEW (N) OR ☐ AMENDED (A)

STATE ▼ DISTRICT MD 01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- [X] April 15 Quarterly Report (Q1)
- [ ] July 15 Quarterly Report (Q2)
- [ ] October 15 Quarterly Report (Q3)
- [ ] January 31 Year-End Report (YE)
- [X] Termination Report (TER) A A

(b) 12-Day **PRE**-Election Report for the:

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

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

☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 01 / 01 / 2012 through 03 / 31 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer BARBARA SMALL

Signature of Treasurer ✓ Date 04 / 11 / 2012

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)

FE5AN018

12020321839

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 OF

[X] 11a [ ] 11b [ ] 11c [ ] 11d [ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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)
FRIENDS OF CHRIS GARNER FOR SENATE

A.
Full Name (Last, First, Middle Initial): LUZIER RONALD
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date
Date of Receipt: 03 / 08 / 2012
Amount of Each Receipt this Period: 1,000.00

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date
Date of Receipt: MM / DD / YYYY
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date
Date of Receipt: MM / DD / YYYY
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 1,000.00

TOTAL This Period (last page this line number only) 1,000.00

12020321840

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

PAGE OF

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NAME OF COMMITTEE (In Full): FRIENDS OF CHRIS GARNER FOR SENATE

A.
Full Name (Last, First, Middle Initial): ESSEX BANK
Mailing Address: 1400 RITCHIE HGHY
City: ARNOLD State: MD Zip Code: 21012
Purpose of Disbursement: BANK FEES
Candidate Name: CHRIS GARNER
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 4822

B.
Full Name (Last, First, Middle Initial): AUTHNET
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement: MO. CR. CARD FEE - B/C DEDUCTION
Candidate Name: CHRIS GARNER
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 127.09

C.
Full Name (Last, First, Middle Initial): SPW PROPERTIES
Mailing Address: 1195 B&A BLVD
City: ARNOLD State: MD Zip Code: 21012
Purpose of Disbursement: RENT
Candidate Name: CHRIS GARNER
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 21,600.00

SUBTOTAL of Disbursements This Page (optional) 21,753.1

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

12020321841

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

PAGE OF

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NAME OF COMMITTEE (In Full): FRIENDS OF CHRIS GARNER FOR SENATE

A.
Full Name (Last, First, Middle Initial): PENNY SPUER, INC
Mailing Address: 1342 CHARWOOD RD
City: HANOVER State: MD Zip Code: 21076
Purpose of Disbursement: ADVERTISING
Candidate Name: CHRIS GARNER
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 1,128.00

B.
Full Name (Last, First, Middle Initial): EAST COUNTY TIMES
Mailing Address: 513 EASTERN BLVD
City: BALTO State: MD Zip Code: 21221
Purpose of Disbursement: ADVERTISING
Candidate Name: CHRIS GARNER
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 514.75

C.
Full Name (Last, First, Middle Initial): WNAV AM 1430
Mailing Address: P.O. BOX 6726
City: ANNAPOLIS State: MD Zip Code: 21401
Purpose of Disbursement: ADVERTISING
Candidate Name: CHRIS GARNER
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 504.00

SUBTOTAL of Disbursements This Page (optional) 1,302.75

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

12020321842

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

PAGE OF

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NAME OF COMMITTEE (In Full): FRIENDS OF CHRIS GARNER FOR SENATE

A.
Full Name (Last, First, Middle Initial): WCTR BROADCASTING, LLC
Mailing Address: P.O. BOX 700
City: CHESTERTOWN State: MD Zip Code: 21620
Purpose of Disbursement: ADVERTISING
Candidate Name: CHRIS GARNER
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03/31/2012
Amount of Each Disbursement this Period: 20,000

B.
Full Name (Last, First, Middle Initial): CBS RADIO
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement: ADVERTISING
Candidate Name: CHRIS GARNER
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03/31/2012
Amount of Each Disbursement this Period: 3,735.00

C.
Full Name (Last, First, Middle Initial): WTOP RADIO
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement: ADVERTISING
Candidate Name: CHRIS GARNER
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03/31/2012
Amount of Each Disbursement this Period: 2,375.00

SUBTOTAL of Disbursements This Page (optional) 63,100.00

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

12020321843

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

PAGE OF

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NAME OF COMMITTEE (In Full): FRIENDS OF CHRIS GARNER FOR SENATE

A.
Full Name (Last, First, Middle Initial): CLEAR CHANNEL RADIO
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement: ADVERTISING
Candidate Name: CHRIS GARNER
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 15,000.00

B.
Full Name (Last, First, Middle Initial): MONT. CO. CABLE ACCESS
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement: DVD TAPE
Candidate Name: CHRIS GARNER
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 20.00

C.
Full Name (Last, First, Middle Initial): PGS MARKETING GROUP LLC
Mailing Address: 2534 COMMERCE BLVD
City: CINN State: OH Zip Code: 45241
Purpose of Disbursement: SIGNS
Candidate Name:
Category/Type: 006
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 253.856

SUBTOTAL of Disbursements This Page (optional): 405.856

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

12020321844

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

PAGE OF

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NAME OF COMMITTEE (In Full): FRIENDS OF CHRIS GARNER FOR SENATE

A.
Full Name (Last, First, Middle Initial): AMERICAN TECHNOLOGY CONSULTING
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement: ROBO CALLS
Candidate Name: CHRIS GARNER
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 3,000.00

B.
Full Name (Last, First, Middle Initial): JEFF WHEELER
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement: DOMAIN NAME - WEB
Candidate Name: CHRIS GARNER
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 104.08

C.
Full Name (Last, First, Middle Initial): E BIZ SERV
Mailing Address: 75 SHADY DR.
City: INDIANA State: PA Zip Code: 15701
Purpose of Disbursement: WEB SITE
Candidate Name: CHRIS GARNER
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 426.00

SUBTOTAL of Disbursements This Page (optional): 3,530.08

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

12020321845

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) ☐ 17 ☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

PAGE OF

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NAME OF COMMITTEE (In Full): FRIENDS OF CHRIS GARNER

A.
Full Name (Last, First, Middle Initial): BETSY EARLY
Mailing Address: 1512 RIVERDALE DR
City: ANNAPOLIS State: MD Zip Code: 21401
Purpose of Disbursement: GRAPHICS
Candidate Name: CHRIS GARNER
Category/Type: 006
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 160.00

B.
Full Name (Last, First, Middle Initial): US POST OFFICE
Mailing Address:
City: ~~STAMPS~~ ARNOLD State: MD Zip Code: 21012
Purpose of Disbursement: ~~CHRIS GARNER~~ / STAMPS
Candidate Name: CHRIS GARNER
Category/Type: 001
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 1.530

C.
Full Name (Last, First, Middle Initial): ANNAPOLIS PHOTOGRAPHER
Mailing Address: 45 OLD SOLOMONS IS RD
City: ANNAPOLIS State: MD Zip Code: 21040
Purpose of Disbursement: PHOTO - ADS
Candidate Name: CHRIS GARNER
Category/Type: 004
Office Sought: ☐ House ☒ Senate ☐ President
State: MD District: 01
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 132.50

SUBTOTAL of Disbursements This Page (optional) 257.80

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

12020321846

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) [X] 17 [ ] 18 [ ] 19a [ ] 19b [ ] 20a [ ] 20b [ ] 20c [ ] 21

PAGE OF

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NAME OF COMMITTEE (In Full): FRIENDS OF CHRIS GARNER FOR SENATE

A.
Full Name (Last, First, Middle Initial): OFFICE DEPOT
Mailing Address:
City: SEVERNA PARK State: MD Zip Code: 21146
Purpose of Disbursement: NAME TAGS
Category/Type: 001
Candidate Name: CHRIS GARNER
Office Sought: [ ] House [X] Senate [ ] President
State: MD District: 01
Disbursement For: [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 27.54

B.
Full Name (Last, First, Middle Initial): STATE OF MARYLAND - BD OF ELECTIONS
Mailing Address: 515 WEST ST STE 200
City: ANNAPOLIS State: MD Zip Code: 21401
Purpose of Disbursement: ELECTION FILING FEE
Category/Type: 001
Candidate Name: CHRIS GARNER
Office Sought: [ ] House [X] Senate [ ] President
State: MD District: 01
Disbursement For: [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 290.00

C.
Full Name (Last, First, Middle Initial): CHRIS GARNER
Mailing Address: 1195 RUA BLVD
City: ARNOLD State: MD Zip Code: 21012
Purpose of Disbursement: REPAY LOAN
Category/Type: 009
Candidate Name: CHRIS GARNER
Office Sought: [ ] House [X] Senate [ ] President
State: MD District: 01
Disbursement For: [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03 / 31 / 2012
Amount of Each Disbursement this Period: 11,491.00

SUBTOTAL of Disbursements This Page (optional): 11,808.54

TOTAL This Period (last page this line number only): 60,043.04

12020321847

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE OF

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS GARNER FOR SENATE

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

Mailing Address
1195 B+A BLVD

City: ARNOLD State: MD ZIP Code: 21012

Election: [X] Primary [ ] General [ ] Other (specify) ▼

Original Amount of Loan: 5994200
Cumulative Payment To Date: 1149100
Balance Outstanding at Close of This Period: 48451.00 *

TERMS
Date Incurred: 03/15/2012
Date Due: 04/15/2012
Interest Rate: 0 % (apr)
Secured: [ ] Yes [X] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶

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.

12020221848

FE5AN018

* LOAN FORGIVEN

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page _____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full): FRIENDS OF CHRIS GARNER FOR SENATE

FEC IDENTIFICATION NUMBER: C

LENDING INSTITUTION (LENDER)
Full Name: NOWE

Amount of Loan

Interest Rate (APR) %

Mailing Address

City State Zip Code

Date Incurred or Established MM / DD / YYYY

Date Due MM / DD / YYYY

A. Has loan been restructured? ☐ No ☐ Yes If yes, date originally incurred MM / DD / YYYY

B. If line of credit, Amount of this Draw: Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?
☐ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
☐ No ☐ Yes If yes, specify: _____

What is the value of this collateral?

Does the lender have a perfected security interest in it? ☐ No ☐ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? ☐ No ☐ Yes If yes, specify: _____

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Date account established: MM / DD / YYYY

Location of account:

Address:

City, State, Zip:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER
Typed Name
Signature

DATE MM / DD / YYYY

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE
Typed Name
Signature
Title

DATE MM / DD / YYYY

12020321849

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

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

PAGE OF

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

NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS GARWIN FOR SENATE

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose): NONE

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

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

City State Zip Code

Nature of Debt (Purpose):

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) ▶	
2) **TOTALS** This Period (last page this line number only) ▶	
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶	0
4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶	

12020321850

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)	Report Covering Period: From:	To:
FRIENDS OF CHRIS GARNER FOR SENATE	01 / 01 / 2012	03 / 31 / 2012

	Committee Name	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A	FRIENDS OF CHRIS GARNER FOR SENATE		
B	Column Total Last Page Only.....	100	0

	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A						
B	0	0	100	0	59942	0

	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A					48552	
B	59942	0	0		[illegible]	0

	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Candidate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A						
B	11491	0	11491	0	0	0

	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A						
B	0	0	60043	0	0	0

	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A						
* B	48451	100				

* LOAN FORGIVEN

12020321851

FE5AN018

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
FRIENDS OF CHRIS GARNER FOR SENATE

Report Covering the Period: From: MM 01 / DD 01 / YYYY 2012 To: MM 03 / DD 31 / YYYY 2012

	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))	100.00	100.00
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	100.00	100.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	48,552.00	48,552.00
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	48,552.00	48,552.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.0	
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.0	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	48,451.00	* FORGIVEN

For further information contact:

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

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

12020321852

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 12/2003)

Write or Type Committee Name

FRIENDS OF CHRIS GARNER FOR SENATE

Report Covering the Period: From: MM 01 / DD 01 / YYYY 2012 To: MM 03 / DD 31 / YYYY 2012

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)	100.00	100.00
(ii) Unitemized		
(iii) TOTAL of contributions from individuals ▶	100.00	100.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	100.00	100.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate	59,942.00	59,942.00
(b) All Other Loans		
(c) TOTAL LOANS (add Lines 13(a) and (b))	59,942.00	59,942.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0	0
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	60,042.00	60,042.00

12020321853

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	48,552.00	48,552.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	11,491.00	11,491.00
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	11,491.00	11,491.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0	0
21. OTHER DISBURSEMENTS		
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	60,043.00	60,043.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	00
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	60,043.00
25. SUBTOTAL (add Line 23 and Line 24)	60,043.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	60,043.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	00

12020321854

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

12 APR 15 AM 11:25

Chris Garner
1195 Baltimore Annapolis Blvd
Arnold, MD 21012

TO: Friends of Chris Garner for Senate

I hereby forgive my loan to the committee, which has a balance of $48,451.00

Chris Garner

12020321855

Mailing Envelope

For Domestic and International Use

EMS

U.S. P(
$12
EXPR
21012
Date of
04/13
02 1
09241
EM0041300105216

ease Rush To Addressee

APR 16 2012

When used internationally affix customs declarations (PS Form 2976, or 2976A).

EXPRESS MAIL
UNITED STATES POSTAL SERVICE®

Addressee Co
Label 11-B, March 20

U.S. POSTAGE
PAID
ARNOLD,MD
21012
APR 13, '12
AMOUNT
0.00
48813-04

Post Office To Addressee

DELIVERY (POSTAL USE ONLY)		
Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Delivery Date 4/16/12 Mo. Day	Time 11:15 ☐ AM ☐ PM	Employee Signature

CUSTOMER USE ONLY

☐ WAIVER OF SIGNATURE (Domestic Mail Only) Additional merchandise insurance is void if customer requests waiver of signature. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.

☐ NO DELIVERY ☐ Weekend ☐ Holiday ☐ Mailer Signature

TO: (PLEASE PRINT) PHONE ( )

ZIP + 4 (U.S. ADDRESSES ONLY. DO NOT USE FOR FOREIGN POSTAL CODES.)

FOR INTERNATIONAL DESTINATIONS, WRITE COUNTRY NAME BELOW.

Receipt Fee

Insurance Fee $

stage & Fees

nce Emp. Initials

U.S. SENATE TRACKING NUMBER 09-034420

Please Recycle

EP-13C

PLEASE PRESS FIRMLY

EXPRESS MAIL
UNITED STATES POSTAL SERVICE

Mailing Envelope

For Domestic and International Use

EMS

EXTREMELY URGENT *Please Rush To Addressee*

APR 1 6 2012

Visit us at usps.com

EI482312958US

1A

1B

HARD. YOU ARE MAKING 3 COPIES.

ORIGIN (POSTAL SERVICE USE ONLY)

PO ZIP Code	Day of Delivery ☐ Next ☐ 2nd ☐ 2nd Bus. Day	Postage $
Date Accepted Mo. Day Year	Scheduled Date of Delivery Month Day	Return Receipt Fee $
Time Accepted ☐ AM ☐ PM	Scheduled Time of Delivery ☐ Noon ☐ 3 PM	COD Fee $ / Insurance Fee $
Flat Rate ☐ or Weight lbs. ozs.	Military ☐ 2nd Day ☐ 3rd Day	Total Postage & Fees $
	Int'l Alpha Country Code	Acceptance Emp. Initials

FROM: (PLEASE PRINT) PHONE ( )

EXPRESS MAIL
UNITED STATES POSTAL SERVICE®

Addressee Co
Label 11-B, March 20

U.S. POSTAGE PAID ARNOLD, MD 21012 APR 13 '12 AMOUNT 0.00 48813-04

Post Office To Addressee

DELIVERY (POSTAL USE ONLY)

Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Delivery Date Mo. Day	Time ☐ AM ☐ PM	Employee Signature

CUSTOMER USE ONLY

☐ WAIVER OF SIGNATURE *(Domestic Mail Only)*
Additional merchandise insurance is void if customer requests waiver of signature. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.

☐ NO DELIVERY ☐ Weekend ☐ Holiday

Mailer Signature

TO: (PLEASE PRINT) PHONE ( )

U.S. SENATE TRACKING NUMBER 09-03442

1202032185 7

LY

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL 04-13-12
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	☐
UPS	_____	☐
DHL	_____	☐
AIRBORNE EXPRESS	_____	☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 04-18-12

12020321858

1202032218 59