

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
**STEVE OBSITNIK FOR CONGRESS, INC**

ADDRESS (number and street) 8 Imperial Landing  
 Check if different than previously reported. (ACC) Westport CT 06880

2. **FEC IDENTIFICATION NUMBER** C C00504357 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
CT 04

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of CT  
11 / 06 / 2012

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
10 / 18 / 2012 through 11 / 26 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer BRADLEY T. CRATE  
Signature of Treasurer BRADLEY T. CRATE [Electronically Filed] Date M M / D D / Y Y Y Y  
10 / 13 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**STEVE OBSITNIK FOR CONGRESS, INC**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	99541.16	1384057.54
(b) Total Contribution Refunds (from Line 20(d)) .....	1525.77	69397.19
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	98015.39	1314660.35
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	241325.76	1405471.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3198.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	241325.76	1402273.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	27453.08	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	133793.06	

**For further information contact:**

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

This amendment is being filed to correct the reporting of an In-Kind contribution. The Cash on Hand is adjusted accordingly.

Form/Schedule:  
Transaction ID:

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

STEVE OBSITNIK FOR CONGRESS, INC

Report Covering the Period: From: 10 / 18 / 2012 To: 11 / 26 / 2012

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 06 / 2012 (date of general election)	COLUMN C Total for 11 / 07 / 2012 (date after general election)  through 11 / 26 / 2012 (last day of reporting period)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
82690.77	1258856.92	2275.77
(ii) Unitemized		
8121.00	73321.23	0.00
(iii) Total of contributions from individuals		
90811.77	1332178.15	2275.77
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
8729.39	51879.39	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 94

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
99541.16	1384057.54	2275.77
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	333793.06	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	333793.06	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	3198.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
99541.16	1721048.60	2275.77

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

**STEVE OBSITNIK FOR CONGRESS, INC**

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

**II. DISBURSEMENTS**

	<b>COLUMN A Total this Period</b>	<b>COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)</b>	<b>COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)</b>
<b>17. OPERATING EXPENDITURES</b>			
	<input type="text" value="241325.76"/>	<input type="text" value="1405471.02"/>	<input type="text" value="19477.31"/>
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>			
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<b>19. LOAN REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate			
	<input type="text" value="200000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="200000.00"/>
(b) Of All Other Loans			
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))			
	<input type="text" value="200000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="200000.00"/>
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals/Persons Other Than Political Committees			
	<input type="text" value="1525.77"/>	<input type="text" value="68397.19"/>	<input type="text" value="1525.77"/>
(b) Political Party Committees			
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 7 / 94

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	1000.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

1525.77	69397.19	1525.77
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**21. OTHER DISBURSEMENTS**

0.00	0.00	0.00
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**22. TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d) and 21)

442851.53	1474868.21	221003.08
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

98015.39	1314660.35	750.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

241325.76	1402273.02	19477.31
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	370763.45
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	99541.16
25. SUBTOTAL (add Line 23 and Line 24).....	470304.61
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	442851.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	27453.08

**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 8 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)  
**STEVE OBSITNIK FOR CONGRESS, INC**

Full Name (Last, First, Middle Initial) <b>A. ANDY ALISBERG</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2012	
Mailing Address 12 DEWART RD		<b>Transaction ID : SA11AI.8961</b>	
City GREENWICH	State CT	Zip Code 06830	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer ARMILLARY PARTNERS	Occupation INVESTMENT MANAGER		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. RICHARD H ANDERSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2012	
Mailing Address 200 EAST HUNTING RIDGE RD		<b>Transaction ID : SA11AI.9190</b>	
City STAMFORD	State CT	Zip Code 06903	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. RICHARD H ANDERSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2012	
Mailing Address 200 EAST HUNTING RIDGE RD		<b>Transaction ID : SA11AI.9191</b>	
City STAMFORD	State CT	Zip Code 06903	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 270.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	320.00
<b>TOTAL</b> This Period (last page this line number only).....	320.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>THOMAS ANDERSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 7 HEARTHSTONE LANE		<b>Transaction ID : SA11AI.9156</b>
City WILTON	State CT	Zip Code 06897
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer AMERICAN EXPRESS CO.	Occupation BANK OFFICER	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>CLIFF ASNESS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2012
Mailing Address 750 THIRD AVE 11TH FLOOR		<b>Transaction ID : SA11AI.8855</b>
City NEW YORK	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer AQR CAPITAL MANAGEMENT	Occupation PRINCIPAL	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>EVELYN BARRACK</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 06 / 2012
Mailing Address 781 WEED ST		<b>Transaction ID : SA11AI.9034</b>
City NEW CANAAN	State CT	Zip Code 06840
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**GERALD BISBEE, JR.**

Mailing Address 377 MAIN STREET, UNIT 1

City State Zip Code  
NEW CANAAN CT 06840

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

Name of Employer Occupation  
THE HEALTH MANAGEMENT ACADEMY BUSINESSMAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2012

**Transaction ID : SA11AI.9036**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**DAVID L BOYLE**

Mailing Address 158 ZACCHEUS MEAD LANE

City State Zip Code  
GREENWICH CT 06831

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

Name of Employer Occupation  
RETIRED BOARD DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11AI.9011**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**GREGORY B BROWN**

Mailing Address 44 ANDREW DRIVE

City State Zip Code  
DARIEN CT 06820

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

Name of Employer Occupation  
HEALTHCARE ROYALTY MANAGEMENT FINANCE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 24 / 2012

**Transaction ID : SA11AI.8793**

Amount of Each Receipt this Period  
2000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**ALEXANDER BURNS**

Mailing Address 160 CENTRAL PARK SOUTH  
APT 1726

City State Zip Code  
NEW YORK NY 10019

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

Name of Employer Occupation  
SOUTHPORT LANE CHIEF STRATEGIST

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2012

**Transaction ID : SA11AI.8817**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**STEPHEN H. BURNS**

Mailing Address 78 CUSHING ROAD

City State Zip Code  
FRIENDSHIP ME 04547

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.8886**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**DAVID D BURROWS**

Mailing Address 29 HILLSIDE DRIVE

City State Zip Code  
GREENWICH CT 06830

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

Name of Employer Occupation  
HUDSON ADVISOR SERVICES, INC. PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.8968**

Amount of Each Receipt this Period  
250.00

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL CAHILL**

Mailing Address 321 TAINTOR DR

City SOUTHPORT State CT Zip Code 06890

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 13 / 2012

**Transaction ID : SA11AI.9152**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS O COUGHLIN**

Mailing Address 143 OENOKE RIDGE ROAD

City NEW CANAAN State CT Zip Code 06840

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

Name of Employer Occupation  
 SELF-EMPLOYED INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 28 / 2012

**Transaction ID : SA11AI.8821**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**RONALD COWEN**

Mailing Address 61 SEAVIEW AVE #4  
 STAMFORD

City CT State CT Zip Code 06902

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

Name of Employer Occupation  
 FANNING ENTERPRISES,INC. MGMT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11AI.9172**

Amount of Each Receipt this Period  
 250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**JOHN COYKENDALL**

Mailing Address **28 ISLAND WAY**

City **WESTPORT** State **CT** Zip Code **06880**

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

Name of Employer **DELLOITTE** Occupation **CONSULTANT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11AI.9117**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**CAROLINE CURRY**

Mailing Address **26 EAST 81ST ST  
7N**

City **NEW YORK** State **NY** Zip Code **10028**

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

Name of Employer **EAGLE CAPITAL MANAGEMENT** Occupation **INVESTMENT MGMT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 19 / 2012**

**Transaction ID : SA11AI.8857**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**FRANK CUTTITA**

Mailing Address **11 HAWTHORNE ROAD**

City **OLD GREENWICH** State **CT** Zip Code **06870**

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

Name of Employer **COLUMBUS CIRCLE INVESTORS** Occupation **COO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11AI.9088**

Amount of Each Receipt this Period  
**500.00**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**NATHANIEL B DAY**

Mailing Address 1 HILLSIDE DR

City GREENWICH State CT Zip Code 06830

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2012

**Transaction ID : SA11AI.8974**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**GARY J DEFILIPPO**

Mailing Address 43 PERCH RD

City SHELTON State CT Zip Code 06484

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

Name of Employer EUGRO GROUP OF COMPANIES Occupation VICE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.8901**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**SALVATORE A DELPRETE**

Mailing Address 400 LOST DISTRICT DRIVE

City NEW CANAAN State CT Zip Code 06840

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

Name of Employer HEMATOLOGY ONCOLOGY ASSOCIATES Occupation ONCOLOGIST/PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2012

**Transaction ID : SA11AI.9040**

Amount of Each Receipt this Period  
25.00

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

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

525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**DOMINIC A DEMARCO**

Mailing Address 133 SUNSET HILL ROAD

City State Zip Code  
NEW CANAAN CT 06840

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

Name of Employer Occupation  
STADIUM CAPITAL MANAGEMENT, LLC INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11AI.9041**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**DOUNYA DISCALA**

Mailing Address 10 VINCENT PLACE

City State Zip Code  
ROWAYTON CT 06853

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

Name of Employer Occupation  
SELF EMPLOYED ENTREPRENEUR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2012

**Transaction ID : SA11AI.8822**

Amount of Each Receipt this Period  
**1500.00**

**C.** Full Name (Last, First, Middle Initial)  
**DAVID DOWLING**

Mailing Address PO BOX 2566

City State Zip Code  
PALATINE IL 60078

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

Name of Employer Occupation  
DAVID DOWLING DEFENSE INDUSTRY MANAGEMENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : SA11AI.8859**

Amount of Each Receipt this Period  
**100.00**

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

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

**1700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)  
**STEVE OBSITNIK FOR CONGRESS, INC**

**A.** Full Name (Last, First, Middle Initial)  
**PHILIP M DRAKE**

Mailing Address 122 PALMERS HILL RD

City State Zip Code  
STAMFORD CT 06902

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

Name of Employer Occupation  
CUMMINGS & LOCKWOOD ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2012

**Transaction ID : SA11AI.9174**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**LOUIS D DUFF**

Mailing Address 63 MIDWOOD RD

City State Zip Code  
GREENWICH CT 06830

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2012

**Transaction ID : SA11AI.8978**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**KIM EBBESEN**

Mailing Address 6 BLUEWATER LN

City State Zip Code  
WESTPORT CT 06880

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : SA11AI.8142**

Amount of Each Receipt this Period  
1500.00

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

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

2000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)  
**STEVE OBSITNIK FOR CONGRESS, INC**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID EIGEN**

Mailing Address 5 RUSTIC LANE

City WESTPORT State CT Zip Code 06880

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

Name of Employer POST ROAD CAPITAL MANAGEMENT Occupation MANAGING MEMBER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11AI.8849**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NECDET F ERGUL**

Mailing Address 88 ROUND HILL RD

City GREENWICH State CT Zip Code 06831

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

Name of Employer MICROPHASE CORP Occupation PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.9015**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**DOUGLAS P FIELDS**

Mailing Address 100 MIDWOOD RD

City GREENWICH State CT Zip Code 06830

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.8979**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**JENNIFER E FOSTER**

Mailing Address 36 CROOKED MILE ROAD

City State Zip Code  
DARIEN CT 06820

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

Name of Employer Occupation  
CHILTON INVESTMENT CO EVP

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11AI.8926**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF SAM JOHNSON**

Mailing Address P.O. BOX 860096

City State Zip Code  
PLANO TX 75086

FEC ID number of contributing federal political committee. **C** C00250720

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : SA11AI.8798**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**JERYL A FROST**

Mailing Address 8 CACCAMO LANE

City State Zip Code  
WESTPORT CT 06880

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

Name of Employer Occupation  
CAROVA CONSULTING LLC CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11AI.9123**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**LUKE GARDNER**

Mailing Address 177 OLD MILL LANE

City State Zip Code  
STAMFORD CT 06902

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

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

**Transaction ID : SA11AI.9176**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**H. LELAND GETZ**

Mailing Address 115 E PUTNAM AVENUE

City State Zip Code  
GREENWICH CT 06830

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2012

**Transaction ID : SA11AI.8980**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN W HETHERINGTON**

Mailing Address 697 VALLEY RD

City State Zip Code  
NEW CANAAN CT 06840

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

Name of Employer Occupation  
STATE OF CT LEGISLATOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2012

**Transaction ID : SA11AI.9043**

Amount of Each Receipt this Period  
200.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. KEN C HICKS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2012	
Mailing Address 8 SHERWOOD FARM LN		<b>Transaction ID : SA11AI.9019</b>	
City GREENWICH	State CT	Zip Code 06831	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00	
Name of Employer FOOT LOCKER INC	Occupation RETAIL		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) <b>B. DAVID R JAFFE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 06 / 2012	
Mailing Address 5 SUMMERSWEET LANE		<b>Transaction ID : SA11AI.9044</b>	
City NEW CANAAN	State CT	Zip Code 06840	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer ASCENA RETAIL INC	Occupation PRESIDENT AND CEO		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3750.00		

Full Name (Last, First, Middle Initial) <b>C. HELEN K JAFFE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 06 / 2012	
Mailing Address 59 SUMMERSWEET LANE		<b>Transaction ID : SA11AI.9046</b>	
City NEW CANAAN	State CT	Zip Code 06840	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5600.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 21 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**KAREN JAMES**

Mailing Address 451 GUARDS RD

City GREENWICH State CT Zip Code 06831

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.9021**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**KIM EATON JEFFERY**

Mailing Address 514 NORTH ST

City GREENWICH State CT Zip Code 06830

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

Name of Employer **NESTLE WATERS NA** Occupation **PRESIDENT & CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : SA11AI.8154**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**JEFFREY JENNINGS**

Mailing Address 15 WITHERELL DRIVE

City GREENWICH State CT Zip Code 06831

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

Name of Employer **CLIFTON BROKERAGE CORPORATION** Occupation **INS. EXEC.**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11AI.9022**

Amount of Each Receipt this Period  
50.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**ANDREW JONES**

Mailing Address **8 TOWN CRIER LANE**

City **WESTPORT** State **CT** Zip Code **06880**

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

Name of Employer **SELF-EMPLOYED** Occupation **PORTFOLIO MANAGER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11AI.9128**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT E KENYON**

Mailing Address **51 BRUSHY HILL RD**

City **DARIEN** State **CT** Zip Code **06820**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 27 / 2012**

**Transaction ID : SA11AI.8928**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**PAUL KNAG**

Mailing Address **27 MILLER RD.**

City **DARIEN** State **CT** Zip Code **06820**

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

Name of Employer **MURTHA CULLING LLP** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 28 / 2012**

**Transaction ID : SA11AI.8930**

Amount of Each Receipt this Period  
**250.00**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**PAUL KNOY**

Mailing Address **27 MILLER RD**

City **DARIEN** State **CT** Zip Code **06820**

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

Name of Employer **MURTHA CULLING LLP** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 06 / 2012**

**Transaction ID : SA11AI.8932**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD KOPPELMAN**

Mailing Address **342 W PUTNAM AVE**

City **GREENWICH** State **CT** Zip Code **06830**

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

Name of Employer **MILLER MOTORCARS INC** Occupation **AUTOMOBILE DEALER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11AI.8984**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**CHRISTOFFEL KREDIET**

Mailing Address **130 LONG NECK POST ROAD**

City **DARIEN** State **CT** Zip Code **06820**

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

Name of Employer **CF CAPITAL** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11AI.8934**

Amount of Each Receipt this Period  
**2500.00**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**CHRISTOFFEL KREDIET**

Mailing Address 130 LONG NECK POST ROAD

City DARIEN State CT Zip Code 06820

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

Name of Employer CF CAPITAL Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : SA11AI.8935**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**ANDREW KRILL**

Mailing Address 150 SOUTHFIELD AVE.

City STAMFORD State CT Zip Code 06902

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

Name of Employer SELF-EMPLOYED Occupation ENTREPRENEUR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.9180**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**JEREMY KROLL**

Mailing Address 845 WEST END AVENUE  
APT. 9E

City NEW YORK State NY Zip Code 10025

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

Name of Employer K2 INTELLIGENCE Occupation CEO AND CO-FOUNDER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : SA11AI.8864**

Amount of Each Receipt this Period  
250.00

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

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

3000.00



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

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

FOR LINE NUMBER: PAGE 25 OF 94  
(check only one)  
 11a  11b  11c  11d  15  
 12 13a 13b 14

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

**A.** Full Name (Last, First, Middle Initial)  
**PETER B LEVY**

Mailing Address 18 MAYFAIR LANE

City State Zip Code  
GREENWICH CT 06831

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

Name of Employer Occupation  
KAMBER MGMT REAL ESTATE MANAGEMENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2012

**Transaction ID : SA11AI.9024**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**FRAYDA LINDEMANN**

Mailing Address 1200 BRICKELL AVE  
STE 700

City State Zip Code  
MIAMI FL 33131

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11AI.8836**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM LOGAN**

Mailing Address 104 FIELD POINT RD

City State Zip Code  
GREENWICH CT 06830

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

Name of Employer Occupation  
KARPREILLY LLC PRIVATE EQUITY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : SA11AI.8137**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 26 OF 94  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**STUART S LOVEJOY**

Mailing Address 516 WEED ST

City State Zip Code  
NEW CANAAN CT 06840

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

Name of Employer Occupation  
OPPENHEIMER AND CO ADVISOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 27 2012

**Transaction ID : SA11AI.9052**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM B LYTTON**

Mailing Address 252 SILVERMINE RD

City State Zip Code  
NEW CANAAN CT 06840

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

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 05 2012

**Transaction ID : SA11AI.9054**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**JI-MEI MA**

Mailing Address 69 LONDONDERRY DRIVE

City State Zip Code  
GREENWICH CT 06830

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

Name of Employer Occupation  
NEBULA CAPITAL MANAGEMENT FINANCE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 25 2012

**Transaction ID : SA11AI.8986**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>ELIZABETH MACGILLIVRAY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 30 / 2012	
Mailing Address 20 SHERWOOD FARM LANE		<b>Transaction ID : SA11AI.8828</b>	
City GREENWICH	State CT	Zip Code 06831	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>ROBERT MAGGARD</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2012	
Mailing Address 143 PARISH RD		<b>Transaction ID : SA11AI.8145</b>	
City NEW CANAAN	State CT	Zip Code 06840	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer		Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		

Full Name (Last, First, Middle Initial) <b>THOMAS J MALONEY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2012	
Mailing Address 36 TWIN LAKES LANE		<b>Transaction ID : SA11AI.9109</b>	
City RIVERSIDE	State CT	Zip Code 06878	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer LINCOLNSHIRE MANAGEMENT	Occupation PRESIDENT		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS MANCINO**

Mailing Address 1333 JONES ST  
UNIT 1110

City SAN FRANCISCO State CA Zip Code 94109

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

Name of Employer SELF-EMPLOYED Occupation INVESTMENTS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11AI.8838**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**JENNIFER MATTHESEN**

Mailing Address 118 GOOD HILL RD

City WESTON State CT Zip Code 06883

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11AI.9141**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**MARY-ELLEN MCDONALD**

Mailing Address 525 SMITH RIDGE RD

City NEW CANAAN State CT Zip Code 06840

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.9057**

Amount of Each Receipt this Period  
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS K MCINERNEY**

Mailing Address 45 BENNINGTON PLACE

City State Zip Code  
NEW CANAAN CT 06840

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

Name of Employer Occupation  
LINDSEY & COMPANY BUSINESSMAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : SA11AI.8152**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**JAMES M MCLAUGHLIN JR**

Mailing Address 589 WEST RD

City State Zip Code  
NEW CANAAN CT 06840

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

Name of Employer Occupation  
LINCOLNSHIRE MANAGEMENT MANAGING DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2012

**Transaction ID : SA11AI.9059**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT JEREMIAH MCMULLAN**

Mailing Address 120 CHRISTIE HILL RD

City State Zip Code  
DARIEN CT 06820

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

Name of Employer Occupation  
BLACKSTONE PRIVATE EQUITY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : SA11AI.8832**

Amount of Each Receipt this Period  
2500.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 30 OF 94  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MARSHA MIFFLIN**

Mailing Address 34 ANDERSON RD

City State Zip Code  
GREENWICH CT 06830

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2012

**Transaction ID : SA11AI.8988**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**BARCLAY MILLER**

Mailing Address 380 DAHLIA ST

City State Zip Code  
DENVER CO 80220

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

Name of Employer Occupation  
SELF-EMPLOYED REAL ESTATE INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11AI.8845**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**PRESCOTT MILLER**

Mailing Address 1795 WEST WESLEY RD

City State Zip Code  
ATLANTA GA 30327

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

Name of Employer Occupation  
ROUND HILL CAPITAL LLC ASSET MANAGEMENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11AI.8843**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**George Moore**

Mailing Address 579 Frogtown Road

City State Zip Code  
New Canaan CT 06840

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

Name of Employer Occupation  
Merrill Lynch SVP

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.9060**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**PETER W MOYER**

Mailing Address 53 FOX RUN RD

City State Zip Code  
NEW CANAAN CT 06840

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
475.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11AI.9061**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**KEVIN O MOYNIHAN**

Mailing Address 135 OENOKE RIDGE

City State Zip Code  
NEW CANAAN CT 06840

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1525.77

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2012

**Transaction ID : SA11AI.9062**

Amount of Each Receipt this Period  
1525.77  
IN-KIND: EVENT & CATERING SERVICES

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

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

2275.77

**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 32 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**JOHN MULLIGAN**

Mailing Address 998 FAIRFIELD BEACH RD

City State Zip Code  
FAIRFIELD CT 06824

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

Name of Employer Occupation  
ALTRIA GROUP, INC. CORPORATE FINANCE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 24 / 2012

**Transaction ID : SA11AI.8951**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**PHYLLIS NICHOLAS**

Mailing Address 40 HOWARD RD

City State Zip Code  
GREENWICH CT 06831

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11AI.9025**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**FREDERIC OHRN**

Mailing Address 100 ORCHARD DRIVE

City State Zip Code  
NEW CANAAN CT 06840

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

Name of Employer Occupation  
SELF-EMPLOYED REAL ESTATE DEVELOPER AND AQUACUL

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2012

**Transaction ID : SA11AI.9064**

Amount of Each Receipt this Period  
250.00

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

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

450.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**FREDERIC OHRN**

Mailing Address 100 ORCHARD DRIVE

City NEW CANAAN State CT Zip Code 06840

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE DEVELOPER AND AQUACUL

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2012

**Transaction ID : SA11AI.9065**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**DAVID PARKER**

Mailing Address 356 HIGH MEADOW RD

City SOUTHPORT State CT Zip Code 06890

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

Name of Employer NIDERA Occupation BUSINESS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : SA11AI.9154**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**JAMES A PARSONS**

Mailing Address 262 BRUSHY RIDGE ROAD

City NEW CANAAN State CT Zip Code 06840

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

Name of Employer RFE MANAGEMENT CORP. Occupation INVESTMENT MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2012

**Transaction ID : SA11AI.8809**

Amount of Each Receipt this Period  
1500.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**GIAN-CARLO PERESSUTTI**

Mailing Address 29 FARM HILL ROAD

City Ridgefield State CT Zip Code 06877

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

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11AI.9105**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**JOHN E PUSKAR**

Mailing Address 14 HAVERHILL PLACE

City Trumbull State CT Zip Code 06611

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

Name of Employer OBSITNIK FOR CONGRESS Occupation CAMPAIGN MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11AI.8910**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**TOM R RAGLAND**

Mailing Address 2 SPRING ST

City Riverside State CT Zip Code 06878

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2012

**Transaction ID : SA11AI.9111**

Amount of Each Receipt this Period  
500.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**BILL RANDON**

Mailing Address **38 MAIN STREET**

City **NEW CANAAN** State **CT** Zip Code **06840**

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

Name of Employer **SELF EMPLOYED** Occupation **ENTREPRENEUR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 28 / 2012**

**Transaction ID : SA11AI.8819**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS REIFENHEISER**

Mailing Address **9 WATCH TOWER RD**

City **DARIEN** State **CT** Zip Code **06820**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : SA11AI.8795**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**JEFF RESNICK**

Mailing Address **219 OVERLOOK DR**

City **GREENWICH** State **CT** Zip Code **06830**

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

Name of Employer **RBC** Occupation **BOND TRADER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 19 / 2012**

**Transaction ID : SA11AI.8995**

Amount of Each Receipt this Period  
**500.00**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**NANCY N RIEGER**

Mailing Address **28 HOME PLACE**  
**UNIT C-2**

City **GREENWICH** State **CT** Zip Code **06830**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11AI.8997**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**J MICHAEL ROSE**

Mailing Address **52 WILLOW ROAD**

City **MENLO PARK** State **CA** Zip Code **94025**

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

Name of Employer **SELF-EMPLOYED** Occupation **BUSINESS OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 04 / 2012**

**Transaction ID : SA11AI.8872**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**ROSKAM VICTORY COMMITTEE; THE**

Mailing Address **610 S BOULEVARD**

City **TAMPA** State **FL** Zip Code **33606**

FEC ID number of contributing federal political committee. **C C00494674**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 27 / 2012**

**Transaction ID : SA11AI.8812**

Amount of Each Receipt this Period  
**2000.00**

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

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

**4000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**FELICE ROVELLI**

Mailing Address 20 CATHLOW DR

City RIVERSIDE State CT Zip Code 06878

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

Name of Employer RIVERSIDE CAPITAL Occupation FINANCE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.9113**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**FELICE ROVELLI**

Mailing Address 20 CATHLOW DR

City RIVERSIDE State CT Zip Code 06878

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

Name of Employer RIVERSIDE CAPITAL Occupation FINANCE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11AI.9114**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**ELLEN ROXBY**

Mailing Address 229 SILVERMINE AVE

City NORWALK State CT Zip Code 06850

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : SA11AI.9078**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**KIERAN RYAN**

Mailing Address **345 STAMFORD AVE**

City **STAMFORD** State **CT** Zip Code **06902**

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11AI.9183**

Amount of Each Receipt this Period  
**20.00**

**B.** Full Name (Last, First, Middle Initial)  
**LEIGH N RYAN**

Mailing Address **141 PARSONAGE ROAD**

City **GREENWICH** State **CT** Zip Code **06830**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11AI.8999**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**ROGER M SACHS**

Mailing Address **6 PHEASANT LN**

City **WESTPORT** State **CT** Zip Code **06880**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 06 / 2012**

**Transaction ID : SA11AI.9135**

Amount of Each Receipt this Period  
**500.00**

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

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

**3020.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**HOWARD SAFFAN**

Mailing Address **9 SQUIRES LN**

City **WESTON** State **CT** Zip Code **06883**

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

Name of Employer **BRIDGEPORT SOUND TIGERS** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 27 / 2012**

**Transaction ID : SA11AI.9143**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**BENJAMIN SALERNO**

Mailing Address **29672 BEACH DR NE**

City **POULSBO** State **WA** Zip Code **98370**

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

Name of Employer **TEKNOLOGIC LLC** Occupation **SENIOR ENGINEER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**301.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2012**

**Transaction ID : SA11AI.8873**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**ANNA SARAS**

Mailing Address **74 ROCK MAPLE RD**

City **GREENWICH** State **CT** Zip Code **06830**

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

Name of Employer **BRISTOL INVESTMENT PARTNERS** Occupation **CCO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11AI.9001**

Amount of Each Receipt this Period  
**250.00**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT F SHARPE Jr.**

Mailing Address 723 FLEMING ST

City State Zip Code  
KEY WEST FL 33040

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

Name of Employer Occupation  
VILLAGE LAUNDRY LLC EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11AI.8159**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT F SHARPE JR**

Mailing Address 723 FLEMING ST

City State Zip Code  
KEY WEST FL 33040

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : SA11AI.8875**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**ERNEST SHIN**

Mailing Address 1881 N. NASH ST  
UNT 1410

City State Zip Code  
ARLINGTON VA 22209

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

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2012

**Transaction ID : SA11AI.8876**

Amount of Each Receipt this Period  
100.00

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

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

2850.00



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

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

FOR LINE NUMBER: PAGE 41 OF 94  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE SKAKEL**

Mailing Address **812 HOLLY HILL LANE**

City **GREENWICH** State **CT** Zip Code **06830**

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

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 19 / 2012**

**Transaction ID : SA11AI.9002**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**JOEL E SMILLOW**

Mailing Address **830 POST RD E #105**

City **WESTPORT** State **CT** Zip Code **06880**

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11AI.9137**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**OWEN C SMITH**

Mailing Address **87 LORDS HIGHWAY**

City **WESTON** State **CT** Zip Code **06883**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 20 / 2012**

**Transaction ID : SA11AI.9144**

Amount of Each Receipt this Period  
**100.00**

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

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

**1100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL SPILO**

Mailing Address **386 NORTH STREET**

City **GREENWICH** State **CT** Zip Code **06830**

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

Name of Employer **SELF-EMPLOYED** Occupation **ENTREPRENEUR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11AI.8801**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**CRAIG B STEINBERG**

Mailing Address **95 KETTLE CREEK RD**

City **WESTON** State **CT** Zip Code **06883**

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

Name of Employer **ASC** Occupation **INVESTMENTS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11AI.9146**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**DONNA R STEINBERG**

Mailing Address **95 KETTLE CREEK RD**

City **WESTON** State **CT** Zip Code **06883**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : SA11AI.9148**

Amount of Each Receipt this Period  
**250.00**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. GAIL R STEWART</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2012	
Mailing Address 15 HAMPTON LANE		<b>Transaction ID : SA11AI.9068</b>	
City NEW CANAAN	State CT	Zip Code 06840	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer WALTER STEWARTS MARKET	Occupation SECRETARY		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>B. PATRICK H SWEARINGEN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2012	
Mailing Address 100 MYANOS RD		<b>Transaction ID : SA11AI.9069</b>	
City NEW CANAAN	State CT	Zip Code 06840	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer ENERGY TRUST LLC	Occupation INVESTMENT MANAGER		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750.00		

Full Name (Last, First, Middle Initial) <b>C. BRANDON W SWEITZER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2012	
Mailing Address 751 WEED ST		<b>Transaction ID : SA11AI.9070</b>	
City NEW CANAAN	State CT	Zip Code 06840	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer ST JOHN'S UNIVERSITY	Occupation DEAN		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 44 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**JANNETTE E SWENSON**

Mailing Address 36 GAME COCK ROAD

City GREENWICH State CT Zip Code 06830

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2012**

**Transaction ID : SA11AI.9004**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**LESLIE L TARKINGTON**

Mailing Address 76 HILLSIDE DR

City GREENWICH State CT Zip Code 06830

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 27 / 2012**

**Transaction ID : SA11AI.9005**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**DAVID N THEIS**

Mailing Address 24 SINAWOY ROAD

City COS COB State CT Zip Code 06807

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

Name of Employer TOWN OF GREENWICH Occupation SELECTMAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 06 / 2012**

**Transaction ID : SA11AI.8919**

Amount of Each Receipt this Period  
**100.00**

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

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

**250.00**

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

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

FOR LINE NUMBER: PAGE 45 OF 94  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**LEE A TREGURTHA**

Mailing Address 248 LONG NECK POINT RD

City DARIEN State CT Zip Code 06820

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : SA11AI.8806**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**RON ULRICH**

Mailing Address 329 DANS HIGHWAY

City NEW CANAAN State CT Zip Code 06840

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

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11AI.9072**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**JOEL M VARGAS**

Mailing Address 33 SHERMAN ST

City STAMFORD State CT Zip Code 06902

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

Name of Employer **GOODMAN NETWORKS** Occupation **TELECOMMUNICATIONS TECHNICIAN**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11AI.9187**

Amount of Each Receipt this Period  
**250.00**

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

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

**1750.00**

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

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

FOR LINE NUMBER: PAGE 46 OF 94  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**JOEL M VARGAS**

Mailing Address 33 SHERMAN ST

City State Zip Code  
STAMFORD CT 06902

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

Name of Employer Occupation  
GOODMAN NETWORKS TELECOMMUNICATIONS TECHNICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11AI.9188**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**JAMES S VENTOS**

Mailing Address 254 BROOKSIDE RD

City State Zip Code  
DARIEN CT 06820

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

Name of Employer Occupation  
JP MORGAN SECURITIES MANAGING DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : SA11AI.8943**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**ROLF VERSLUIS**

Mailing Address 10400 OLD ALABAMA RD. CONN.

City State Zip Code  
ALPHARETTA GA 30022

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

Name of Employer Occupation  
ADCAP NETWORK SYSTEMS, INC. EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : SA11AI.8158**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**SUE A WEINBERG**

Mailing Address 70 FIELD POINT CIRCLE

City GREENWICH State CT Zip Code 06830

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2012

**Transaction ID : SA11AI.9008**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**JONATHAN WENDELL**

Mailing Address 22 TURNER DR

City GREENWICH State CT Zip Code 06831

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

Name of Employer **NASSAU POINT INVESTORS, LLC** Occupation **INVESTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : SA11AI.8156**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD A YOUNG**

Mailing Address 301 W LYON FARM DR

City GREENWICH State CT Zip Code 06831

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

Name of Employer **SELF** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2012

**Transaction ID : SA11AI.9032**

Amount of Each Receipt this Period  
150.00

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

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

1400.00

82690.77

**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 48 OF 94
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**EVERY REPUBLICAN IS CRUCIAL (ERICPAC)**

Mailing Address **25 E MAIN STREET**  
**SUITE 200**

City **RICHMOND** State **VA** Zip Code **23219**

FEC ID number of contributing federal political committee. **C C00384701**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **5000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 22 / 2012**

**Transaction ID : SA11C.8148**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **5000.00**

**B.** Full Name (Last, First, Middle Initial)  
**INVEST IN A STRONG AND SECURE AMERICA - ISSA PAC**

Mailing Address **PO BOX 3799**

City **VISTA** State **CA** Zip Code **92085**

FEC ID number of contributing federal political committee. **C C00450320**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **2000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : SA11C.8885**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **2000.00**

**C.** Full Name (Last, First, Middle Initial)  
**LONGHORN PAC**

Mailing Address **PO BOX 30844**

City **BETHESDA** State **MD** Zip Code **20824**

FEC ID number of contributing federal political committee. **C C00402602**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 22 / 2012**

**Transaction ID : SA11C.8170**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1000.00**

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

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

\_\_\_\_\_ **8000.00**

\_\_\_\_\_



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN MAJORITY FOR CHOICE**

Mailing Address 1900 L ST NW  
SUITE 320

City WASHINGTON State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
29.39

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11C.8882**

Amount of Each Receipt this Period  
29.39

IN-KIND: 2012 VOTER GUIDE

**B.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN MAJORITY FOR CHOICE**

Mailing Address 1900 L ST NW  
SUITE 320

City WASHINGTON State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
529.39

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : SA11C.8883**

Amount of Each Receipt this Period  
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

529.39

8529.39

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. DAVID BERMAN</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 84 SILVER SPRING ROAD		Amount of Each Disbursement this Period 343.00
City RIDGEFIELD	State CT	
Zip Code 06877	Purpose of Disbursement TRAVEL	Transaction ID : SB17.9241
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DAVID BERMAN</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 84 SILVER SPRING ROAD		Amount of Each Disbursement this Period 568.75
City RIDGEFIELD	State CT	
Zip Code 06877	Purpose of Disbursement TRAVEL	Transaction ID : SB17.9242
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BEST BUY</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 330 CONNECTICUT AVE #4		Amount of Each Disbursement this Period 192.48
City NORWALK	State CT	
Zip Code 06854	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.9262
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1104.23
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. BLANCHETTE SPORTING GOODS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012	
Mailing Address 425 BRIDGEPORT AVE			Amount of Each Disbursement this Period 538.13	
City SHELTON	State CT	Zip Code 06484	Transaction ID : SB17.9264	
Purpose of Disbursement EVENT STAGING EXPENSE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BLANCHETTE SPORTING GOODS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012	
Mailing Address 425 BRIDGEPORT AVE			Amount of Each Disbursement this Period 248.86	
City SHELTON	State CT	Zip Code 06484	Transaction ID : SB17.9265	
Purpose of Disbursement EVENT STAGING EXPENSE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CABLEVISION</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012	
Mailing Address 28 CROSS STREET			Amount of Each Disbursement this Period 287.04	
City NORWALK	State CT	Zip Code 06851	Transaction ID : SB17.9269	
Purpose of Disbursement BROADBAND SERVICES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1074.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. CAPITOL REPORT MEDIA GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 314 TOWN ST		Amount of Each Disbursement this Period 625.00 <b>Transaction ID : SB17.9387</b>
City EAST HADDAM State CT Zip Code 06423	Purpose of Disbursement PRINT ADVERTISING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CIJ ADMINISTRATIVE SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address PO BOX 1824		Amount of Each Disbursement this Period 525.00 <b>Transaction ID : SB17.9389</b>
City BUFORD State GA Zip Code 30515	Purpose of Disbursement ADMINISTRATIVE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANDREW S CLARK</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 131 BACK RIVER		Amount of Each Disbursement this Period 929.09 <b>Transaction ID : SB17.9237</b>
City DOVER State NH Zip Code 03820	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2079.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial)  
**A. CONNECTICUT LIGHT AND POWER**

Mailing Address PO BOX 150493

City HARTFORD State CT Zip Code 06115

Purpose of Disbursement UTILITIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 14 / 2012

Amount of Each Disbursement this Period: 213.05

Transaction ID : SB17.9390

Full Name (Last, First, Middle Initial)  
**B. GARY J DEFILIPPO**

Mailing Address 43 PERCH RD

City SHELTON State CT Zip Code 06484

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 01 / 2012

Amount of Each Disbursement this Period: 560.17

Transaction ID : SB17.9243

Full Name (Last, First, Middle Initial)  
**C. GARY J DEFILIPPO**

Mailing Address 43 PERCH RD

City SHELTON State CT Zip Code 06484

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 02 / 2012

Amount of Each Disbursement this Period: 1114.64

Transaction ID : SB17.9244

**SUBTOTAL** of Disbursements This Page (optional) ..... 1887.86

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. CHRIS DEPINO</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 1160 TOWNSEND AVENUE		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB17.9239</b>
City NEW HAVEN State CT Zip Code 06512	Purpose of Disbursement EVENT ENTERTAINMENT- MUSIC	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DIRECT MAIL SYSTEMS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 5605.00 <b>Transaction ID : SB17.9391</b>
City Clearwater State FL Zip Code 33762	Purpose of Disbursement DIRECT MAIL PRINTING & POSTAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DIRECT MAIL SYSTEMS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 1260.00 <b>Transaction ID : SB17.9392</b>
City Clearwater State FL Zip Code 33762	Purpose of Disbursement DIRECT MAIL PRINTING & POSTAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7465.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. DREW DESIGN</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 155 WEST AVE		Amount of Each Disbursement this Period 461.00
City STRATFORD	State CT Zip Code 06615	
Purpose of Disbursement PRINTING & DESIGN SERVICES	Category/Type	<b>Transaction ID : SB17.9280</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EPAY BUSINESS SOLUTIONS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 19 MIDSTATE DRIVE STE 120		Amount of Each Disbursement this Period 43.70
City AUBURN	State MA Zip Code 01501	
Purpose of Disbursement PAYROLL SERVICES/TAXES	Category/Type	<b>Transaction ID : SB17.9393</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EPAY BUSINESS SOLUTIONS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 19 MIDSTATE DRIVE STE 120		Amount of Each Disbursement this Period 12354.78
City AUBURN	State MA Zip Code 01501	
Purpose of Disbursement PAYROLL SERVICES/TAXES	Category/Type	<b>Transaction ID : SB17.9394</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12859.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. EPAY BUSINESS SOLUTIONS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012	
Mailing Address 19 MIDSTATE DRIVE STE 120			Amount of Each Disbursement this Period 12354.83	
City AUBURN	State MA	Zip Code 01501	Transaction ID : SB17.9396	
Purpose of Disbursement PAYROLL SERVICES/TAXES		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. EXXON MOBIL</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012	
Mailing Address 5959 LAS COLINAS BOULEVARD			Amount of Each Disbursement this Period 53.24	
City IRVING	State TX	Zip Code 75039	Transaction ID : SB17.9286	
Purpose of Disbursement TRAVEL: FUEL		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. EXXON MOBIL</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012	
Mailing Address 5959 LAS COLINAS BOULEVARD			Amount of Each Disbursement this Period 47.75	
City IRVING	State TX	Zip Code 75039	Transaction ID : SB17.9287	
Purpose of Disbursement TRAVEL: FUEL		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12455.82
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. EXXON MOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 5959 LAS COLINAS BOULEVARD		Amount of Each Disbursement this Period 19.99
City IRVING State TX Zip Code 75039	Purpose of Disbursement TRAVEL: FUEL	
Candidate Name		Transaction ID : SB17.9288
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. EXXON MOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 5959 LAS COLINAS BOULEVARD		Amount of Each Disbursement this Period 60.35
City IRVING State TX Zip Code 75039	Purpose of Disbursement TRAVEL: FUEL	
Candidate Name		Transaction ID : SB17.9289
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. EXXON MOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 5959 LAS COLINAS BOULEVARD		Amount of Each Disbursement this Period 40.98
City IRVING State TX Zip Code 75039	Purpose of Disbursement TRAVEL: FUEL	
Candidate Name		Transaction ID : SB17.9290
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	121.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. EXXON MOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 5959 LAS COLINAS BOULEVARD		Amount of Each Disbursement this Period 53.70
City IRVING State TX Zip Code 75039	Purpose of Disbursement TRAVEL: FUEL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.9291
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EXXON MOBIL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 5959 LAS COLINAS BOULEVARD		Amount of Each Disbursement this Period 39.44
City IRVING State TX Zip Code 75039	Purpose of Disbursement TRAVEL: FUEL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.9292
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FTIN STRATEGIES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 325 E. JIMMIE LEEDS RD SUITE 117		Amount of Each Disbursement this Period 1514.42
City GALLOWAY State NJ Zip Code 08205	Purpose of Disbursement EQUIPMENT RENTAL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.9397
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1607.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 94		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. GREATER NORWALK CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 101 EAST AVE		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.9399</b>
City NORWALK State CT Zip Code 06851	Purpose of Disbursement EVENT REGISTRATION FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SEAN HUTSON</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address P.O. BOX 268		Amount of Each Disbursement this Period 268.15 <b>Transaction ID : SB17.9255</b>
City WESTFIELD CENTER State OH Zip Code 44251	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SEAN HUTSON</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address P.O. BOX 268		Amount of Each Disbursement this Period 535.35 <b>Transaction ID : SB17.9256</b>
City WESTFIELD CENTER State OH Zip Code 44251	Purpose of Disbursement TRAVEL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1053.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. INHALT CORPORATION</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 4000 LAKE BEAU PRE BLVD #63		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.9401</b>
City BATON ROUGE	State LA	
Zip Code 70820	Purpose of Disbursement DIGITAL CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. RON C MILLER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 631 LONG RIDGE RD UNIT 43		Amount of Each Disbursement this Period 519.58 <b>Transaction ID : SB17.9251</b>
City STAMFORD	State CT	
Zip Code 06902	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. RON C MILLER</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 631 LONG RIDGE RD UNIT 43		Amount of Each Disbursement this Period 280.30 <b>Transaction ID : SB17.9252</b>
City STAMFORD	State CT	
Zip Code 06902	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1799.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. KEVIN O MOYNIHAN</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 135 OENOKE RIDGE		Amount of Each Disbursement this Period 1525.77
City NEW CANAAN	State CT	
Zip Code 06840	Purpose of Disbursement IN-KIND: EVENT & CATERING SERVICES	Transaction ID : SB17.9232
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NORWALK INN</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 99 EAST AVE		Amount of Each Disbursement this Period 500.00
City NORWALK	State CT	
Zip Code 06855	Purpose of Disbursement FACILITY RENTAL/CATERING SERVICES	Transaction ID : SB17.9359
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. OMNIMAGNET, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 50 W. HILLCREST DRIVE SUITE 204		Amount of Each Disbursement this Period 7200.00
City THOUSAND OAKS	State CA	
Zip Code 91360	Purpose of Disbursement WEB HOSTING	Transaction ID : SB17.9402
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9225.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. ON MESSAGE INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012	
Mailing Address 2130 PRIEST BRIDGE DR. #11			Amount of Each Disbursement this Period 55802.00	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SB17.9403	
Purpose of Disbursement PLACED MEDIA		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. ON MESSAGE INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012	
Mailing Address 2130 PRIEST BRIDGE DR. #11			Amount of Each Disbursement this Period 7308.22	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SB17.9404	
Purpose of Disbursement PLACED MEDIA		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. ON MESSAGE INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012	
Mailing Address 2130 PRIEST BRIDGE DR. #11			Amount of Each Disbursement this Period 1978.97	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SB17.9405	
Purpose of Disbursement PLACED MEDIA		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	65089.19
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 94		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. ON MESSAGE INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 2130 PRIEST BRIDGE DR. #11		Amount of Each Disbursement this Period 9,999.99 86280.00
City CROFTON State MD Zip Code 21114	Category/Type	
Purpose of Disbursement PLACED MEDIA		Transaction ID : SB17.9406
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PANERA BREAD</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 596 WESTPORT AVE		Amount of Each Disbursement this Period 9,999.99 -27.58
City NORWALK State CT Zip Code 06851	Category/Type	
Purpose of Disbursement CREDIT: MEETING EXPENSE		Transaction ID : SB17.9324
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMANDA BERGEN PERESSUTTI</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 29 FARM HILL RD		Amount of Each Disbursement this Period 9,999.99 5000.00
City RIDGEFIELD State CT Zip Code 06877	Category/Type	
Purpose of Disbursement COMMUNICATIONS CONSULTING		Transaction ID : SB17.9233
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	91252.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. AMANDA BERGEN PERESSUTTI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 29 FARM HILL RD		Amount of Each Disbursement this Period 257.85 <b>Transaction ID : SB17.9234</b>
City RIDGEFIELD	State CT	
Zip Code 06877	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AMANDA BERGEN PERESSUTTI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 29 FARM HILL RD		Amount of Each Disbursement this Period 129.10 <b>Transaction ID : SB17.9235</b>
City RIDGEFIELD	State CT	
Zip Code 06877	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 158.32 <b>Transaction ID : SB17.9407</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	545.27
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 44.63
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.9408	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 268.83
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.9409	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 125.39
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.9410	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	438.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 356.80
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.9411	
Purpose of Disbursement MERCHANT FEES		Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 191.07
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.9412	
Purpose of Disbursement MERCHANT FEES		Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 25.51
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.9413	
Purpose of Disbursement MERCHANT FEES		Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	573.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 94		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 371.88 <b>Transaction ID : SB17.9414</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 154.50 <b>Transaction ID : SB17.9415</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 174.06 <b>Transaction ID : SB17.9416</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	700.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 181.69
City SAN FRANCISCO State CA Zip Code 94105	Category/Type	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.9417
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 354.89
City SAN FRANCISCO State CA Zip Code 94105	Category/Type	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.9418
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 236.98
City SAN FRANCISCO State CA Zip Code 94105	Category/Type	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.9419
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	773.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 145.57
City SAN FRANCISCO State CA Zip Code 94105	Category/Type	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.9420
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 205.10
City SAN FRANCISCO State CA Zip Code 94105	Category/Type	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.9421
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 730.00
City SAN FRANCISCO State CA Zip Code 94105	Category/Type	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.9422
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1080.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 8.12
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.9423	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 57.38
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.9424	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 106.25
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.9425	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	171.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 216.75 <b>Transaction ID : SB17.9426</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 106.26 <b>Transaction ID : SB17.9427</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 167.89 <b>Transaction ID : SB17.9428</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	490.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2012	
Mailing Address 144 SECOND STREET 1ST FLOOR			Amount of Each Disbursement this Period 199.77	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.9429	
Purpose of Disbursement MERCHANT FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PIRYX INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2012	
Mailing Address 144 SECOND STREET 1ST FLOOR			Amount of Each Disbursement this Period 21.26	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.9430	
Purpose of Disbursement MERCHANT FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PIRYX INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012	
Mailing Address 144 SECOND STREET 1ST FLOOR			Amount of Each Disbursement this Period 21.25	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.9431	
Purpose of Disbursement MERCHANT FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	242.28
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial)  
**A. PRIME RESOURCES**

Mailing Address 1100 BOSTON AVE

City BRIDGEPORT State CT Zip Code 06610

Purpose of Disbursement  
MARKETING MATERIALS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 22 / 2012

Amount of Each Disbursement this Period  
309.60

Transaction ID : SB17.9433

Category/Type

Full Name (Last, First, Middle Initial)  
**B. JOHN PUSKAR JR.**

Mailing Address 14 HAVERHILL PLACE

City TRUMBULL State CT Zip Code 06611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 24 / 2012

Amount of Each Disbursement this Period  
404.40

Transaction ID : SB17.9250

Category/Type

Full Name (Last, First, Middle Initial)  
**C. GARY RAYTAR**

Mailing Address 8 SUNNYRIDGE PKWY

City TRUMBULL State CT Zip Code 06611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 19 / 2012

Amount of Each Disbursement this Period  
190.75

Transaction ID : SB17.9245

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 904.75

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. GARY RAYTAR</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 8 SUNNYRIDGE PKWY		Amount of Each Disbursement this Period 3000.00
City TRUMBULL	State CT	Zip Code 06611
Purpose of Disbursement FIELD CONSULTING	Category/ Type	
Candidate Name	Transaction ID : SB17.9246	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GARY RAYTAR</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 8 SUNNYRIDGE PKWY		Amount of Each Disbursement this Period 145.25
City TRUMBULL	State CT	Zip Code 06611
Purpose of Disbursement TRAVEL	Category/ Type	
Candidate Name	Transaction ID : SB17.9247	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GARY RAYTAR</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 8 SUNNYRIDGE PKWY		Amount of Each Disbursement this Period 3600.00
City TRUMBULL	State CT	Zip Code 06611
Purpose of Disbursement FIELD CONSULTING	Category/ Type	
Candidate Name	Transaction ID : SB17.9248	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6745.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. GARY RAYTAR</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 8 SUNNYRIDGE PKWY		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB17.9249</b>
City TRUMBULL	State CT	
Zip Code 06611	Purpose of Disbursement FIELD CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. RED CURVE SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 138 CONANT ST 1ST FLOOR		Amount of Each Disbursement this Period 108.89 <b>Transaction ID : SB17.9434</b>
City BEVERLY	State MA	
Zip Code 01915	Purpose of Disbursement DELIVERY SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. RED CURVE SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 138 CONANT ST 1ST FLOOR		Amount of Each Disbursement this Period 2276.23 <b>Transaction ID : SB17.9435</b>
City BEVERLY	State MA	
Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2985.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. RED CURVE SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 138 CONANT ST 1ST FLOOR		Amount of Each Disbursement this Period 2250.00
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type	<b>Transaction ID : SB17.9436</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 420 WESTPORT AVE		Amount of Each Disbursement this Period -18.07
City NORWALK	State CT Zip Code 06851	
Purpose of Disbursement CREDIT: OFFICE SUPPLIES	Category/Type	<b>Transaction ID : SB17.9342</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 420 WESTPORT AVE		Amount of Each Disbursement this Period 49.95
City NORWALK	State CT Zip Code 06851	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	<b>Transaction ID : SB17.9347</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2281.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 420 WESTPORT AVE		Amount of Each Disbursement this Period 49.96
City NORWALK State CT Zip Code 06851	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.9348
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 420 WESTPORT AVE		Amount of Each Disbursement this Period 31.36
City NORWALK State CT Zip Code 06851	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.9349
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 420 WESTPORT AVE		Amount of Each Disbursement this Period 49.83
City NORWALK State CT Zip Code 06851	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.9350
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	131.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

**A. STAPLES**

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

City NORWALK State CT Zip Code 06851

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 122.80

Transaction ID : SB17.9351

**B. STAPLES**

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

City NORWALK State CT Zip Code 06851

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 149.23

Transaction ID : SB17.9352

**C. STAPLES**

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

City NORWALK State CT Zip Code 06851

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 115.82

Transaction ID : SB17.9353

**SUBTOTAL** of Disbursements This Page (optional) ..... 387.85

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

**A. STAPLES**

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

City NORWALK State CT Zip Code 06851

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 425.34

Transaction ID : SB17.9354

**B. STEW LEONARD'S**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 WESTPORT AVENUE

City NORWALK State CT Zip Code 06851

Purpose of Disbursement TRAVEL: FOOD

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 11.84

Transaction ID : SB17.9355

**C. STEW LEONARD'S**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 WESTPORT AVENUE

City NORWALK State CT Zip Code 06851

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 47.34

Transaction ID : SB17.9356

**SUBTOTAL** of Disbursements This Page (optional) ..... 484.52

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. STEW LEONARD'S</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 100 WESTPORT AVENUE			Amount of Each Disbursement this Period 396.80 <b>Transaction ID : SB17.9357</b>
City NORWALK	State CT	Zip Code 06851	
Purpose of Disbursement TRAVEL: FOOD		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. TECH DONATIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 1101 PENNSYLVANIA AVE NW			Amount of Each Disbursement this Period 6.76 <b>Transaction ID : SB17.9441</b>
City WASHINGTON	State DC	Zip Code 20004	
Purpose of Disbursement MERCHANT FEES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. US POST OFFICE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 16 WASHINGTON ST			Amount of Each Disbursement this Period 365.80 <b>Transaction ID : SB17.9368</b>
City NORWALK	State CT	Zip Code 06855	
Purpose of Disbursement POSTAGE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	396.23
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. US POST OFFICE</b>		Date of Disbursement
Mailing Address 16 WASHINGTON ST		M M / D D / Y Y Y Y 11 / 06 / 2012
City NORWALK	State CT	Zip Code 06855
Purpose of Disbursement POSTAGE	Candidate Name	Amount of Each Disbursement this Period 450.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.9369

Full Name (Last, First, Middle Initial) <b>B. US POST OFFICE</b>		Date of Disbursement
Mailing Address 16 WASHINGTON ST		M M / D D / Y Y Y Y 11 / 06 / 2012
City NORWALK	State CT	Zip Code 06855
Purpose of Disbursement POSTAGE	Candidate Name	Amount of Each Disbursement this Period 96.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.9370

Full Name (Last, First, Middle Initial) <b>C. US POST OFFICE</b>		Date of Disbursement
Mailing Address 16 WASHINGTON ST		M M / D D / Y Y Y Y 11 / 06 / 2012
City NORWALK	State CT	Zip Code 06855
Purpose of Disbursement POSTAGE	Candidate Name	Amount of Each Disbursement this Period 96.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.9371

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	642.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. US POST OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 16 WASHINGTON ST		Amount of Each Disbursement this Period 540.00
City NORWALK	State CT Zip Code 06855	
Purpose of Disbursement POSTAGE	Category/Type	<b>Transaction ID : SB17.9372</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US POST OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 16 WASHINGTON ST		Amount of Each Disbursement this Period 12.95
City NORWALK	State CT Zip Code 06855	
Purpose of Disbursement POSTAGE	Category/Type	<b>Transaction ID : SB17.9373</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. US POST OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 16 WASHINGTON ST		Amount of Each Disbursement this Period 225.00
City NORWALK	State CT Zip Code 06855	
Purpose of Disbursement POSTAGE	Category/Type	<b>Transaction ID : SB17.9374</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	777.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. US POST OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 16 WASHINGTON ST		Amount of Each Disbursement this Period 230.00 <b>Transaction ID : SB17.9375</b>
City NORWALK State CT Zip Code 06855	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US POST OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 16 WASHINGTON ST		Amount of Each Disbursement this Period 12.95 <b>Transaction ID : SB17.9376</b>
City NORWALK State CT Zip Code 06855	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. US POST OFFICE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 16 WASHINGTON ST		Amount of Each Disbursement this Period 12.95 <b>Transaction ID : SB17.9377</b>
City NORWALK State CT Zip Code 06855	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	255.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. US POST OFFICE</b>		Date of Disbursement
Mailing Address 16 WASHINGTON ST		M M / D D / Y Y Y Y 11 / 06 / 2012
City NORWALK	State CT	Zip Code 06855
Purpose of Disbursement POSTAGE	Candidate Name	Amount of Each Disbursement this Period 12.95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : SB17.9378

Full Name (Last, First, Middle Initial) <b>B. US POST OFFICE</b>		Date of Disbursement
Mailing Address 16 WASHINGTON ST		M M / D D / Y Y Y Y 11 / 06 / 2012
City NORWALK	State CT	Zip Code 06855
Purpose of Disbursement POSTAGE	Candidate Name	Amount of Each Disbursement this Period 225.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : SB17.9379

Full Name (Last, First, Middle Initial) <b>C. US POST OFFICE</b>		Date of Disbursement
Mailing Address 16 WASHINGTON ST		M M / D D / Y Y Y Y 11 / 06 / 2012
City NORWALK	State CT	Zip Code 06855
Purpose of Disbursement POSTAGE	Candidate Name	Amount of Each Disbursement this Period 180.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : SB17.9380

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	417.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

**A. US POST OFFICE**

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

City NORWALK State CT Zip Code 06855

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 64.00

Transaction ID : SB17.9381

**B. RON WAITE**

Full Name (Last, First, Middle Initial)  
Mailing Address 578 WHITNEY AVENUE

City NEW HAVEN State CT Zip Code 06511

Purpose of Disbursement FIELD CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 24 / 2012

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.9254

**C. WYLIE STRATEGY GROUP**

Full Name (Last, First, Middle Initial)  
Mailing Address 345 E 94TH ST  
APT 25E

City NEW YORK State NY Zip Code 10128

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 24 / 2012

Amount of Each Disbursement this Period: 7552.68

Transaction ID : SB17.9443

**SUBTOTAL** of Disbursements This Page (optional) ..... 8616.68

**TOTAL** This Period (last page this line number only) ..... 239119.48

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 94	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. STEPHEN OBSITNIK</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 8 IMPERIAL LANDING		Amount of Each Disbursement this Period 200000.00 <b>Transaction ID : SB19A.9444</b>
City WESTPORT State CT Zip Code 06880	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CT District: 04		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	200000.00
<b>TOTAL</b> This Period (last page this line number only).....	200000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 94			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

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

Full Name (Last, First, Middle Initial) <b>A. KEVIN O MOYNIHAN</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 135 OENOKE RIDGE		Amount of Each Disbursement this Period 1525.77
City NEW CANAAN	State CT Zip Code 06840	
Purpose of Disbursement CONTRIBUTION REFUND	Category/Type	Transaction ID : SB20A.9231
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1525.77
<b>TOTAL</b> This Period (last page this line number only).....	1525.77

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

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

FOR LINE NUMBER: (check only one)

13a  
 13b

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

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

City	State	ZIP Code
WESTPORT	CT	06880

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

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
10 / 05 / 2011	1/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	1200.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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



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

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

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

City	State	ZIP Code
WESTPORT	CT	06880

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

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
10 / 05 / 2011	1/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	1250.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4608

**STEVE OBSITNIK FOR CONGRESS, INC**

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

**[PERSONAL FUNDS]**

Election: 2012

**STEPHEN OBSITNIK**

Primary

General

Other (specify) ▼

Convention

Mailing Address

8 IMPERIAL LANDING

City

State

ZIP Code

WESTPORT

CT

06880

Original Amount of Loan

531.75

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

531.75

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

10 / 06 / 2011

1/31/2015

0.00 % (apr)

Yes  No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

531.75

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

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4607

**STEVE OBSITNIK FOR CONGRESS, INC**

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

**[PERSONAL FUNDS]**

Election: 2012

**STEPHEN OBSITNIK**

Primary

General

Other (specify) ▼

Convention

Mailing Address

8 IMPERIAL LANDING

City

State

ZIP Code

WESTPORT

CT

06880

Original Amount of Loan

713.61

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

713.61

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

11

09

2011

1/31/2015

0.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

713.61

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

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4606

**STEVE OBSITNIK FOR CONGRESS, INC**

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

**[PERSONAL FUNDS]**

Election: 2012

**STEPHEN OBSITNIK**

Primary

General

Other (specify) ▼

Convention

Mailing Address

8 IMPERIAL LANDING

City

State

ZIP Code

WESTPORT

CT

06880

Original Amount of Loan

97.70

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

97.70

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 11 /

D 17 /

Y 2011 Y

M M /

D D /

Y 1/31/2015 Y

0.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

97.70

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

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

# SCHEDULE C (FEC Form 3) LOANS

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

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

City	State	ZIP Code
WESTPORT	CT	06880

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

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
03 / 31 / 2012	1/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	130000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

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

NAME OF COMMITTEE (In Full) **STEVE OBSITNIK FOR CONGRESS, INC** Transaction ID : **SC/10.8127**

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

City	State	ZIP Code
WESTPORT	CT	06880

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200000.00	200000.00	0.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
09 / 30 / 2012	12/31/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="0.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input type="text" value="133793.06"/>

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