

REPORT OF RECEIPTS AND DISBURSEMENTS
 BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT 1 / 34

1. NAME OF COMMITTEE (in full) ROMNEY FOR PRESIDENT, INC.	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 80 HAYDEN AVENUE	2. IDENTIFICATION NUMBER C00431171
CITY, STATE, and ZIP CODE LEXINGTON MA 02421	3. IS THIS REPORT FOR : <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General

4. TYPE OF REPORT (Check here if this is a Termination Report.)

<input type="checkbox"/> April 15 Quarterly Report <input type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report <input type="checkbox"/> January 31 Year End Report	Monthly Report Due On: <table style="width: 100%;"> <tr> <td><input type="checkbox"/> February 20</td> <td><input type="checkbox"/> June 20</td> <td><input type="checkbox"/> October 20</td> </tr> <tr> <td><input type="checkbox"/> March 20</td> <td><input type="checkbox"/> July 20</td> <td><input type="checkbox"/> November 20</td> </tr> <tr> <td><input type="checkbox"/> April 20</td> <td><input type="checkbox"/> August 20</td> <td><input type="checkbox"/> December 20</td> </tr> <tr> <td><input type="checkbox"/> May 20</td> <td><input type="checkbox"/> September 20</td> <td><input checked="" type="checkbox"/> January 31</td> </tr> </table>	<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20	<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20	<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20	<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input checked="" type="checkbox"/> January 31
<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20											
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20											
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20											
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input checked="" type="checkbox"/> January 31											

Twelfth day report preceding Primary _____
 (Type of Election)
 election on 11/04/2008 in the State of _____

Thirtieth day report following the General Election on _____
 on _____

IS THIS REPORT AN AMENDMENT YES NO

5. COVERING PERIOD	FROM 12/01/2008	THROUGH 12/31/2008
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SUMMARY		
6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	23322.82
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	25708.94
8. SUBTOTAL (Lines 6 and 7)	.....	49031.76
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	.....	16443.91
10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	.....	32587.85
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	.....	0.00
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	.....	250000.00
13. EXPENDITURES SUBJECT TO LIMITATION	.....	0.00
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES		
14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	.....	-1000.00
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	.....	2906.69

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 Darrell Crate	Date 01/29/2009
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Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

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(PAGE 2, FEC FORM 3P)

Name of committee (in full) ROMNEY FOR PRESIDENT, INC.		Report Covering the Period From: 12/01/2008 To: 12/31/2008	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)		0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees		0.00	95.80
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees		0.00	0.00
(d) The Candidate		0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		0.00	95.80
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate		0.00	0.00
(b) Other Loans		0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))		0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating		13919.80	14319.80
(b) Fundraising		0.00	0.00
(c) Legal and Accounting		0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		13919.80	14319.80
21. OTHER RECEIPTS (Dividend, Interest, etc.)		11789.14	23455.81
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)		25708.94	37871.41
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES		16443.91	17226.49
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		0.00	0.00
25. FUNDRAISING DISBURSEMENTS		0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS		0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate		0.00	0.00
(b) Other Repayments		0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))		0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees		0.00	1095.80
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees		0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))		0.00	1095.80
29. OTHER DISBURSEMENTS		0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)		16443.91	18322.29
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)		0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

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1. NAME OF COMMITTEE (in full) ROMNEY FOR PRESIDENT, INC.					
ADDRESS (number and street) 80 HAYDEN AVENUE					
CITY, STATE, and ZIP CODE LEXINGTON MA 02421			2. IDENTIFICATION NUMBER C00431171		

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachussetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	0.00

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 4 / 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 19a <input checked="" type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
 ROMNEY FOR PRESIDENT, INC.

Transaction ID: M3C-1

LOAN SOURCE Full Name (Last, First, Middle Initial) GOLDMAN SACHS & CO.- SECURED BY PERSONAL ASSETS OF CANDIDATE	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 85 BROAD STREET	
City NEW YORK State NY ZIP Code 10004	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000000.00	2000000.00	0.00

TERMS

Date Incurred M M 0 2 D D 0 4 Y Y Y Y 2 0 0 8	Date Due 12/31/2008	Interest Rate 0.0000 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value=".00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5 / 34 FOR LINE NUMBER: (check only one) <table style="margin-left: 20px;"> <tr> <td><input checked="" type="checkbox"/></td> <td>19a</td> </tr> <tr> <td><input type="checkbox"/></td> <td>19b</td> </tr> </table>	<input checked="" type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input checked="" type="checkbox"/>	19a				
<input type="checkbox"/>	19b				

LOANS

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC.02

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY- CONVERTED TO CONTRIBUT - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500000.00	1500000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:						
<table style="font-size: small;"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>1 2</td> <td>2 2</td> <td>2 0 0 6</td> </tr> </table>	M M	D D	Y Y Y Y	1 2	2 2	2 0 0 6	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M M	D D	Y Y Y Y							
1 2	2 2	2 0 0 6							

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional) ▶	<input style="width: 100%;" type="text" value="0.00"/>
TOTALS This Period (last page in this line only) ▶	<input style="width: 100%;" type="text" value=".00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 6 / 34
FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 19a <input type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-M608

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONV. \$2,050k TO CONTRI - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2300000.00	2050000.00	250000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 05 D D 15 Y Y Y Y 2008	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	250000.00
TOTALS This Period (last page in this line only) .....	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC.01

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONV. \$805k TO CONTRIBU - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
850000.00	850000.00	0.00

TERMS

Date Incurred: MM DD YY 10 25 2006 Date Due: 12/31/2008 Interest Rate: 0.0000 % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	0.00
TOTALS This Period (last page in this line only) .....	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-08

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]		Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE		
City LEXINGTON	State MA	ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000000.00	3000000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 1 D D 1 5 Y Y Y Y 2 0 0 7	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
TOTALS This Period (last page in this line only) .....	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-09

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSON-
AL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000000.00	3000000.00	0.00

TERMS

Date Incurred: MM DD YY YY 11 28 2007
Date Due: 12/31/2008
Interest Rate: 0.0000 % (apr)
Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	0.00
TOTALS This Period (last page in this line only) .....	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC.03

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]		Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE		
City LEXINGTON	State MA	ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2500000.00	2500000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 05 D D 11 Y Y Y Y 2007	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
TOTALS This Period (last page in this line only) .....	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC.04

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]		Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE		
City LEXINGTON	State MA	ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4000000.00	4000000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 06 D D 29 Y Y Y Y 2007	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
TOTALS This Period (last page in this line only) .....	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-05

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSON-
AL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3500000.00	3500000.00	0.00

TERMS

Date Incurred: MM DD YY Y Y Y Y Secured: Yes No
 09 10 2007 12/31/2008 Interest Rate: 0.0000 % (apr)

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value=".00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 13 / 34
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 19a <input type="checkbox"/> 19b

LOANS

NAME OF COMMITTEE (In Full)
 ROMNEY FOR PRESIDENT, INC. Transaction ID: SC-06

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000000.00	5000000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 09 D D 28 Y Y Y Y 2007	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
TOTALS This Period (last page in this line only) .....	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-07

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSON-
AL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000000.00	3000000.00	0.00

TERMS

Date Incurred Date Due Interest Rate % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value=".00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 15 / 34
FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 19a <input type="checkbox"/> 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-10

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE	
City LEXINGTON State MA ZIP Code 02421	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000000.00	3000000.00	0.00

TERMS

Date Incurred M M 1 2 D D 1 0 Y Y Y Y 2 0 0 7	Date Due 12/31/2008	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	------------------------	---------------------------------	---

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
TOTALS This Period (last page in this line only) .....	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-11

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSON-
AL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000000.00	3000000.00	0.00

TERMS

Date Incurred: MM DD YY YY 12 18 2007
Date Due: 12/31/2008
Interest Rate: 0.0000 % (apr)
Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
TOTALS This Period (last page in this line only) .....	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-12

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSON-
AL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000000.00	3000000.00	0.00

TERMS

Date Incurred Date Due Interest Rate % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value=".00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-001

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4650000.00	4650000.00	0.00

TERMS

Date Incurred Date Due Interest Rate % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value=".00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER:
(check only one) 19a
 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-02

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1600000.00	1600000.00	0.00

TERMS

Date Incurred Date Due Interest Rate % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value=".00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

LOANS

FOR LINE NUMBER: (check only one) 19a 19b

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-03

LOAN SOURCE Full Name (Last, First, Middle Initial) MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]		Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 80 HAYDEN AVENUE		
City LEXINGTON	State MA	ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
450000.00	450000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 0 1 D D 2 2 Y Y Y Y 2 0 0 8	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	0.00
TOTALS This Period (last page in this line only) .....	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

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

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FOR LINE NUMBER: (check only one) 19a 19b

LOANS

NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

Transaction ID: SC-04

LOAN SOURCE Full Name (Last, First, Middle Initial)
MITT ROMNEY-CONVERTED TO CONTRIBUTI - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 80 HAYDEN AVENUE

City LEXINGTON State MA ZIP Code 02421

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	250000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YYYY 01 23 2008	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value="250000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-P-1
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for
 Information found on
 Page 22 / 34 of Schedule C

Name of Committee (in Full) ROMNEY FOR PRESIDENT, INC.		FEC IDENTIFICATION NUMBER C00431171	
Back Ref ID: M3C-1			
LENDING INSTITUTION (LENDER) Full Name GOLDMAN SACHS & CO.		Amount of Loan 2000000.00	Interest Rate (APR) 0.0000 %
Mailing Address 85 BROAD STREET		Date Incurred or Established 02 04 2008	
City NEW YORK	State NY	Zip Code 10004	Date Due 12/31/2008
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : _____			
B. If line of credit, Amount of this Draw: 0.00		Total Outstanding balance : 0.00	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>PERSONAL ASSETS OF CANDIDATE HELD AT GOLDMAN SACHS</u>		What is the value of this collateral? 2000000.00 Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? 0.00	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: _____		Location of account Address: City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name DARRELL CRATE Signature _____		DATE 02 04 2008	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name JIM DONOVAN Signature _____		DATE 02 04 2008	
Title Managing Director			

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 34
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<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)
ROMNEY FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) OMNITURE		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 8	
Mailing Address 550 E TIMPANAGOS CIR		Amount of Each Receipt this Period 12275.89	
City OREM	State UT	Zip Code 84097	
FEC ID number of contributing federal political committee.		REFUND- WEB SERVICE	
Name of Employer		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 12275.89	
		Transaction ID: SA20A.3	

B. Full Name (Last, First, Middle Initial) XO COMMUNICATIONS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8	
Mailing Address 14239 COLLECT CENTER DR		Amount of Each Receipt this Period 843.91	
City CHICAGO	State IL	Zip Code 60693	
FEC ID number of contributing federal political committee.		REFUND- WEB SERVICE	
Name of Employer		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 843.91	
		Transaction ID: SA20A.2	

C. Full Name (Last, First, Middle Initial) FREE AND STRONG AMERICA PAC INC		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8	
Mailing Address 80 HAYDEN AVENUE		Amount of Each Receipt this Period 800.00	
City LEXINGTON	State MA	Zip Code 02421	
FEC ID number of contributing federal political committee.		EQUIPMENT PURCHASE	
Name of Employer		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 800.00	
		Transaction ID: SA20A.1	

SUBTOTAL of Receipts This Page (optional) ▶	13919.80
TOTAL This Period (last page this line number only) ▶	13919.80

**Schedule A-P
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 34
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) BANK OF AMERICA	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 260 HANOVER STREET	Amount of Each Receipt this Period 122.47
	City State Zip Code BOSTON MA 02113	
	FEC ID number of contributing federal political committee.	INTEREST EARNINGS
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 235151.30	
		Transaction ID: SA21.2

B.	Full Name (Last, First, Middle Initial) FREE AND STRONG AMERICA PAC INC.	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 80 HAYDEN AVENUE	Amount of Each Receipt this Period 11666.67
	City State Zip Code LEXINGTON MA 02421	
	FEC ID number of contributing federal political committee.	LIST RENTAL
	Name of Employer Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 23333.34	
		Transaction ID: SA21.1

SUBTOTAL of Receipts This Page (optional)	11789.14
TOTAL This Period (last page this line number only)	11789.14

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) BRAD CRATE	Transaction ID: SB23.8 Date of Disbursement 12 / 09 / 2008
	Mailing Address 45 OAK ST	Amount of Each Disbursement this Period 1500.00
	City BEVERLY FARM State MA Zip Code 01915	
	Purpose of Disbursement COMPLIANCE CONSULTING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) HUI JOJO DENG	Transaction ID: SB23.6 Date of Disbursement 12 / 09 / 2008
	Mailing Address 117 BEACONSFIELD RD	Amount of Each Disbursement this Period 225.00
	City BROOKLINE State MA Zip Code 02445	
	Purpose of Disbursement COMPLIANCE CONSULTING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) HUI JOJO DENG	Transaction ID: SB23.9 Date of Disbursement 12 / 16 / 2008
	Mailing Address 117 BEACONSFIELD RD	Amount of Each Disbursement this Period 270.00
	City BROOKLINE State MA Zip Code 02445	
	Purpose of Disbursement COMPLIANCE CONSULTING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1995.00
TOTAL This Period (last page this line number only)	▶	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 26 / 34

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) MAR LEXHAY</p> <p>Mailing Address 80 HAYDEN AVE</p> <p>City LEXINGTON State MA Zip Code 02421</p> <p>Purpose of Disbursement RENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.15</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="134.55"/></p> <p>Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) BRUCE NILSON</p> <p>Mailing Address 40 KINGS WAY #401A</p> <p>City WALTHAM State MA Zip Code 02451</p> <p>Purpose of Disbursement COMPLIANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.2</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="1000.00"/></p> <p>Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) ABIGAIL MANAGEMENT</p> <p>Mailing Address 700 LOUISIANA STE 5000</p> <p>City HOUSTON State TX Zip Code 77002</p> <p>Purpose of Disbursement VOID CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.21</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="-3974.00"/></p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

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

**Schedule B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB23CCP.1 Date of Disbursement
	Mailing Address PO BOX 2855	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>
	City NEW YORK State NY Zip Code 10116	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PAYMENT	<input type="text" value="311.06"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) SHUTTERFLY	Transaction ID: SB23CCD.1 Date of Disbursement
	Mailing Address 2800 BRIDGE PARKWAY	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>
	City REDWOOD CITY State CA Zip Code 94065	Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="276.90"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) SHUTTERFLY	Transaction ID: SB23CCD.2 Date of Disbursement
	Mailing Address 2800 BRIDGE PARKWAY	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>
	City REDWOOD CITY State CA Zip Code 94065	Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="34.16"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="311.06"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) ASTADIA INC. Mailing Address 16415 ADDISON RD STE 225 City ADDISON State TX Zip Code 75001 Purpose of Disbursement WEB SERVICE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8 Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) BANK OF AMERICA Mailing Address 260 HANOVER ST City BOSTON State MA Zip Code 02113 Purpose of Disbursement BANK FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.1 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 8 Amount of Each Disbursement this Period 927.38
C.	Full Name (Last, First, Middle Initial) CITY EXPRESS Mailing Address PO BOX 52317 City BOSTON State MA Zip Code 02205 Purpose of Disbursement DELIVERY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8 Amount of Each Disbursement this Period 300.45

SUBTOTAL of Disbursements This Page (optional) ▶

2227.83

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) CMDI <hr/> Mailing Address 7704 LEESBURG PIKE <hr/> City FALLS CHURCH State VA Zip Code 22043 <hr/> Purpose of Disbursement DATA MANAGEMENT SERVICE Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.3 Date of Disbursement 12 / 09 / 2008 <hr/> Amount of Each Disbursement this Period 2500.00
B.	Full Name (Last, First, Middle Initial) COMPLIANCE CONSULTING COMPANY OF VA <hr/> Mailing Address PO BOX 365 <hr/> City MCLEAN State VA Zip Code 22101 <hr/> Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.4 Date of Disbursement 12 / 09 / 2008 <hr/> Amount of Each Disbursement this Period 4000.00
C.	Full Name (Last, First, Middle Initial) CORPORATION SERVICE COMPANY <hr/> Mailing Address PO BOX 13397 <hr/> City PHILADELPHIA State PA Zip Code 19101 <hr/> Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.5 Date of Disbursement 12 / 09 / 2008 <hr/> Amount of Each Disbursement this Period 180.23

SUBTOTAL of Disbursements This Page (optional) ▶

6680.23

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

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) ENILSSON <hr/> Mailing Address 70 BROADWAY <hr/> City WESTFORD State MA Zip Code 01886 Purpose of Disbursement WEB SERVICE Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.19 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">280.80</div>
B.	Full Name (Last, First, Middle Initial) FEDEX <hr/> Mailing Address PO BOX 371461 <hr/> City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">22.71</div>
C.	Full Name (Last, First, Middle Initial) INTUIT <hr/> Mailing Address 2632 MARINE WAY <hr/> City MOUNTAIN VIEW State CA Zip Code 94043 Purpose of Disbursement OFFICE SUPPLIES Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.14 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">129.47</div>

SUBTOTAL of Disbursements This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px;">432.98</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) IRON MOUNTAIN	Transaction ID: SB23.16 Date of Disbursement 12 / 09 / 2008
	Mailing Address PO BOX 27128	Amount of Each Disbursement this Period 178.40
	City NEW YORK State NY Zip Code 10087	
	Purpose of Disbursement STORAGE SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LOCKART ATCHLEY & ASSOC	Transaction ID: SB23.7 Date of Disbursement 12 / 09 / 2008
	Mailing Address 6850 AUSTIN CENTER BLVD STE 180	Amount of Each Disbursement this Period 2289.13
	City AUSTIN State TX Zip Code 78731	
	Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MINDSHIFT TECHNOLOGIES INC	Transaction ID: SB23.20 Date of Disbursement 12 / 09 / 2008
	Mailing Address 307 WAVERLEY OAKS RD #201	Amount of Each Disbursement this Period 142.00
	City WALTHAM State MA Zip Code 02452	
	Purpose of Disbursement WEB SERVICE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	2609.53
TOTAL This Period (last page this line number only)	▶	

Schedule B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.	Full Name (Last, First, Middle Initial) PATTON BOGGS	Transaction ID: SB23.13
	Mailing Address 2550 M ST NW	Date of Disbursement MM / DD / YYYY 12 / 09 / 2008
	City WASHINGTON State DC Zip Code 20037	Amount of Each Disbursement this Period 205.74
	Purpose of Disbursement LEGAL CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SCANSCOUT	Transaction ID: SB23.17
	Mailing Address 129 SOUTH ST 3RD FL	Date of Disbursement MM / DD / YYYY 12 / 09 / 2008
	City BOSTON State MA Zip Code 02111	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement WEB ADS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) UNITED BUSINESS MACHINES	Transaction ID: SB23.12
	Mailing Address 13 DELTA DR STE 9 & 10	Date of Disbursement MM / DD / YYYY 12 / 09 / 2008
	City LONDONDERRY State NH Zip Code 03053	Amount of Each Disbursement this Period 48.26
	Purpose of Disbursement EQUIPMENT RENTAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	10254.00
TOTAL This Period (last page this line number only)	

**Schedule B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ROMNEY FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)
WATTLES CAPITAL MANAGEMENT

Transaction ID: SB23.22

Date of Disbursement

Mailing Address 7945 W SAHARA AVE STE 205

^M 1	^M 2	/	^D 3	^D 1	/	^Y 2	^Y 0	^Y 0	^Y 8
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City LAS VEGAS State NV Zip Code 89119

Amount of Each Disbursement this Period

-5227.27

Purpose of Disbursement
VOID CHECK

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Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

-5227.27

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

16443.91

Image# 29990856970

Form/Schedule: **SC/12**
Transaction ID: **M3C-1**

SCHEDULE C - GOLDMAN SACHS LINE OF CREDIT Interest rate is Prime + 1.0% Line of credit is secured by per
assets of candidate held at Goldman Sachs.
