

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Zaccaria for Senate

Report Covering the Period: From: ^M 10 / ^D 16 / ^Y 2014 To: ^M 11 / ^D 24 / ^Y 2014

	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)) ...	12486.00	36583.00
(b) Total Contribution Refunds (from Line 20(d)) ...	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	12486.00	36583.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	42180.83	53576.11
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	42180.83	53576.11
8. Cash on Hand at Close of Reporting Period (from Line 27)...	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...	17448.36	

For further information contact:

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

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

14021224043

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- 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

Zaccaria for Senate

Report Covering the Period: From: M M D D / Y Y 10 16 2014 To: M M D D Y Y 11 24 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <small>M M D D / Y Y</small> 11 04 2014 (date of general election)	COLUMN C Total for <small>M M D D Y Y</small> 11 05 2014 (date after general election) through <small>M M D D Y Y</small> 11 24 2014 (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
750.00	21250.00	0.00
(ii) Unitemized		
736.00	4183.00	0.00
(iii) Total of contributions from individuals		
1486.00	25433.00	0.00
(b) Political Party Committees		
11000.00	11000.00	0.00
(c) Other Political Committees		
0.00	150.00	0.00

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POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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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
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))	12486.00	36583.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	5000.00	20500.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	5000.00	20500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	17486.00	57083.00

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POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

Zaccaria for Senate

Report Covering the Period: From: ^{M M} 10 ^{D D} 16 ^{Y Y Y} 2014 To: ^{M M} 11 ^{D D} 24 ^{Y Y} 2014

II. DISBURSEMENTS

	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)
17. OPERATING EXPENDITURES			
	42180.83	53576.11	455.25
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			
	0.00	0.00	0.00
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			
	3051.64	0.00	3051.64
(b) Of All Other Loans			
	0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))			
	3051.64	0.00	3051.64
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees			
	0.00	0.00	0.00
(b) Political Party Committees			
	0.00	0.00	0.00

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POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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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)
(c) Other Political Committees (such as PACs)		
0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))		
0.00	0.00	0.00
21. OTHER DISBURSEMENTS		
0.00	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)		
45232.47	53576.11	3506.89

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))

12486.00	36583.00	0.00
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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)

42180.83	53576.11	455.25
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	27746.47
24. TOTAL RECIEPTS THIS PERIOD (from Line 16)...	17486.00
25. SUBTOTAL (add Line 23 and Line 24)...	45232.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	45232.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	0.00

14021224047

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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)
Zaccaria for Senate

Full Name (Last, First, Middle Initial) B B Hinckley		Date of Receipt M M D D Y Y 11 04 2014	
Mailing Address 46 Houston Ave		Transaction ID : SA11AI.4317	
City Newport	State RI	Zip Code 02840	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00	
Name of Employer unemployed	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Martha Stamp		Date of Receipt M M D D Y Y 10 17 2014	
Mailing Address 49 Bedford Drive		Transaction ID : SA11AI.4328	
City Wakefield	State RI	Zip Code 02879	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 300.00	
Name of Employer Foxwoods Resorts	Occupation Ticket Rep		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Martha Stamp		Date of Receipt M M D D Y Y 10 24 2014	
Mailing Address 49 Bedford Drive		Transaction ID : SA11AI.4329	
City Wakefield	State RI	Zip Code 02879	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 400.00	
Name of Employer Foxwoods Resorts	Occupation Ticket Rep		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	.

14021224048

**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 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Zaccaria for Senate

A. Full Name (Last, First, Middle Initial) Steven Tilley		Date of Receipt
Mailing Address 116 Mourning Dove Drive		M M D D Y Y 10 27 2014
City Saunderstown	State RI	Zip Code 02874
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.4330
Name of Employer SMT Capital, LLC		Occupation Real estate developer
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date
		Amount of Each Receipt this Period 300.00
		300.00

B. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M D D Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date
		Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M D D Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date
		Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	750.00

14021224049

**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 19
	<input type="checkbox"/> 11a 12 <input checked="" 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)
Zaccaria for Senate

Full Name (Last, First, Middle Initial) The State Central Committee of the RI Republican Party		Date of Receipt M M D D Y Y 10 20 2014
A. Mailing Address 1800 Post Road Suite 17-1		Transaction ID : SA11B.4313
City Warwick	State RI	
FEC ID number of contributing federal political committee. C C00078196		Amount of Each Receipt this Period 11000.00
Name of Employer	Occupation	, .
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 11000.00	

Full Name (Last, First, Middle Initial)		Date of Receipt
B. Mailing Address		M
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	, .
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial)		Date of Receipt
C. Mailing Address		
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	, .
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	, ,	11000.00
TOTAL This Period (last page this line number only).....	, ,	11000.00

14021224050

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

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

FOR LINE NUMBER: PAGE 10 OF 19
(check only one)

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

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NAME OF COMMITTEE (In Full)
Zaccaria for Senate

Full Name (Last, First, Middle Initial) Mark Zaccaria		Date of Receipt M M D D Y Y 10 29 2014	
A. Mailing Address 35 Congdon Hill Rd		Transaction ID : SA13A.4340	
City Saunderstown	State RI	Zip Code 02874	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer self employed	Occupation marketing consultant		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20500.00		

Full Name (Last, First, Middle Initial)		Date of Receipt	
B. Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial)		Date of Receipt	
C. Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

14021224051

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA13A

Transaction ID : SA13A.4340

\$5,000.00 balance on loan was foregiven in its entirety by candidate in a formal written statement dated 11/17/2014.

Form/Schedule:

Transaction ID:

14021224052

**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 12 OF 19

<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)
Zaccaria for Senate

Full Name (Last, First, Middle Initial) A. Bernadette B Dion		Date of Disbursement M M / D D / Y Y 11 / 17 / 2014	
Mailing Address 34 Salem Dr		Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.4354	
City North Kingstown	State RI		Zip Code 02852
Purpose of Disbursement accounting services, October through close			001 Category/ Type
Candidate Name Zaccaria for Senate			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: RI	District: 02		

Full Name (Last, First, Middle Initial) B. PayPal		Date of Disbursement M M / D D / Y Y 11 / 03 / 2014	
Mailing Address 2211 North First St		Amount of Each Disbursement this Period 14.98 Transaction ID : SB17.4335	
City San Jose	State CA		Zip Code 95131
Purpose of Disbursement fundraising fees			003 Category/ Type
Candidate Name Zaccaria for Senate			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: RI	District: 02		

Full Name (Last, First, Middle Initial) c. The Prince Group		Date of Disbursement M M / D D / Y Y 10 / 17 / 2014	
Mailing Address PMB 310 42 Lake Ave Ext		Amount of Each Disbursement this Period 25000.00 Transaction ID : SB17.4336	
City Danbury	State CT		Zip Code 06811
Purpose of Disbursement campaign add fees			004 Category/ Type
Candidate Name Zaccaria for Senate			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: RI	District: 02		

SUBTOTAL of Disbursements This Page (optional).....	25464.98
TOTAL This Period (last page this line number only).....	

14021224053

**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 13 OF 19	
	<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)
Zaccaria for Senate

Full Name (Last, First, Middle Initial) A. The Prince Group		Date of Disbursement M M / D D Y Y 10 22 2014
Mailing Address PMB 310 42 Lake Ave Ext		Amount of Each Disbursement this Period 16594.00 Transaction ID : SB17.4337
City Danbury	State CT	
Purpose of Disbursement campaign add fees		Category/ Type 004
Candidate Name Zaccaria for Senate		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: RI	District: 02	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State	
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) C.		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State	
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:	

SUBTOTAL of Disbursements This Page (optional).....	16594.00
TOTAL This Period (last page this line number only).....	42058.98

14021224054

**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 14 OF 19	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" 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)
Zaccaria for Senate

Full Name (Last, First, Middle Initial) A. Mark Zaccaria		Date of Disbursement M M D D Y Y 11 17 2014	
Mailing Address 35 Congdon Hill Rd		Amount of Each Disbursement this Period 500.00	
City Saunderstown	State RI	Zip Code 02874	Transaction ID : SB19A.4360
Purpose of Disbursement Loan repayment		009 Category/ Type	
Candidate Name Zaccaria for Senate			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: RI District: 02			

Full Name (Last, First, Middle Initial) B. Mark Zaccaria		Date of Disbursement M M D D Y Y 11 17 2014	
Mailing Address 35 Congdon Hill Rd		Amount of Each Disbursement this Period 2551.64	
City Saunderstown	State RI	Zip Code 02874	Transaction ID : SB19A.4361
Purpose of Disbursement Loan repayment		009 Category/ Type	
Candidate Name Zaccaria for Senate			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: RI District: 02			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	
Purpose of Disbursement			
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:			

SUBTOTAL of Disbursements This Page (optional).....	3051.64
TOTAL This Period (last page this line number only).....	3051.64

14021224055

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) **Zaccaria for Senate** Transaction ID : **SC/10.4162**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mark Zaccaria	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 35 Congdon Hill Rd		
City Saunderstown	State RI	ZIP Code 02874

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	500.00	0.00

TERMS	Date Incurred M 06 D 24 2014	Date Due None	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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)...	0.00
TOTALS This Period (last page in this line only) ...	

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

14021224056

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)
Zaccaria for Senate

Transaction ID : SC/10.4257

LOAN SOURCE Full Name (Last, First, Middle Initial) <i>[PERSONAL FUNDS]</i> Mark Zaccaria		Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 35 Congdon Hill Rd		
City Saunderstown	State RI	ZIP Code 02874
Original Amount of Loan 15000.00	Cumulative Payment To Date 2551.64	Balance Outstanding at Close of This Period 12448.36

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M ^M 09 ^M D ^D 25 ^D Y ^Y 2014 ^Y	Y ^Y none ^Y	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:

SUBTOTALS This Period This Page (optional).....	12448.36
TOTALS This Period (last page in this line only) ..	12448.36

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

14021224057

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10
Transaction ID : SC/10.4257

\$12,448.36 balance owed on loan was foregiven in its entirety by candidate in formal written statement 11/17/2014.

Form/Schedule:
Transaction ID:

14021224058

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)
Zaccaria for Senate

Transaction ID : **SC/10.4340**

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]		Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Mark Zaccaria			
Mailing Address 35 Congdon Hill Rd			
City	State	ZIP Code	
Saunderstown	RI	02874	
Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period	
5000.00	0.00	5000.00	

TERMS				Secured:	
Date Incurred	Date Due	Interest Rate			
M ¹⁰ D ²⁹ Y ²⁰¹⁴	Y ^{none}	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:	

SUBTOTALS This Period This Page (optional)... 5000.00

TOTALS This Period (last page in this line only) .. 17448.36

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

14021224059

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10
Transaction ID : SC/10.4340

\$5,000.00 balance on loan was foregiven in its entirety by candidate in a formal written statement dated 11/17/2014.

Form/Schedule:
Transaction ID:

14021224060

14021224051

35 Congdon Hill Road
Saunderstown, RI 02874
November 13th, 2014

Bernadette Dion
Treasurer
Zaccaria for Senate Committee
Post Office Box 1302
North Kingstown, RI 02852

Dear Ms. Dion,

This is to formally inform you of my decision to forgive a portion of the debt owed me by your Committee.

Please be advised that I hereby forgive \$17,448.36 of the overall amount I loaned this Campaign during the 2014 Election Cycle.

If you have any questions or comments on this matter please do not hesitate to call or write.

Your assistance in this matter is greatly appreciated.

Very Truly Yours,

MARK ZACCARIA





Mark Zaccaria

14021224053

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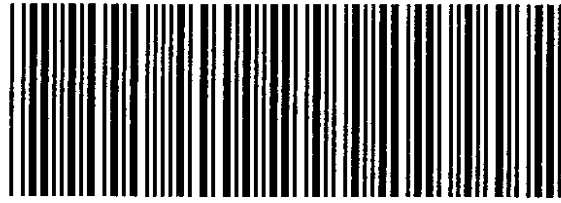
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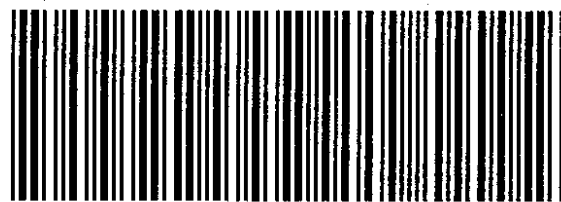
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