REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

FRIENDS OF KAREN TESTERMAN

POST OFFICE BOX 3874
CONCORD, NH 03302

FEC IDENTIFICATION NUMBER ▼
C00547828

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

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

(b) 12-Day PRE-Election Report for the:
☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

(c) 30-Day POST-Election Report for the:
☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

5. Covering Period 10/01/2013 through 12/31/2013

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

Jonathon A. Moseley

Signature of Treasurer

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.
FRIENDS OF KAREN TESTERMAN

Report Covering the Period: From: 10 01 2013 To: 12 31 2013

6. Net Contributions (other than loans)
   (a) Total Contributions (other than loans) (from Line 11(e)) .... 15960.07
   (b) Total Contribution Refunds (from Line 20(d)) .............. 0.00
   (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .... 15960.07

7. Net Operating Expenditures
   (a) Total Operating Expenditures (from Line 17) ................ 28239.00
   (b) Total Offsets to Operating Expenditures (from Line 14) .... 0.00
   (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .... 28239.00

8. Cash on Hand at Close of Reporting Period (from Line 27) .... 2804.07

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) 8000.00

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100
### I. RECEIPTS

11. CONTRIBUTIONS (other than loans) FROM:

<table>
<thead>
<tr>
<th>Description</th>
<th>Total This Period</th>
<th>Election Cycle-to-Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Individuals/Persons Other Than</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Political Committees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) Itemized (use Schedule A) .............</td>
<td>9385.00</td>
<td>13335.00</td>
</tr>
<tr>
<td>(ii) Unitemized</td>
<td>5907.00</td>
<td>9037.00</td>
</tr>
<tr>
<td>(iii) TOTAL of contributions</td>
<td>15282.00</td>
<td>22372.00</td>
</tr>
<tr>
<td>from individuals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b) Political Party Committees</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) Other Political Committees</td>
<td>668.07</td>
<td>668.07</td>
</tr>
<tr>
<td>(such as PACs)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(d) The Candidate</td>
<td>0.00</td>
<td>10.00</td>
</tr>
<tr>
<td>(e) TOTAL CONTRIBUTIONS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(other than loans)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(add Lines 11(a)(ii), (b), (c), and (d))</td>
<td>15960.07</td>
<td>22050.07</td>
</tr>
</tbody>
</table>

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES: 0.00

13. LOANS:

<table>
<thead>
<tr>
<th>Description</th>
<th>Total This Period</th>
<th>Election Cycle-to-Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Made or Guaranteed by the Candidate</td>
<td>8000.00</td>
<td>8000.00</td>
</tr>
<tr>
<td>(b) All Other Loans</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) TOTAL LOANS</td>
<td>8000.00</td>
<td>8000.00</td>
</tr>
<tr>
<td>(add Lines 13(a) and (b))</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14. OFFSETS TO OPERATING EXPENDITURES:

<table>
<thead>
<tr>
<th>Description</th>
<th>Total This Period</th>
<th>Election Cycle-to-Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Refunds, Rebates, etc.)</td>
<td>0.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>

15. OTHER RECEIPTS:

<table>
<thead>
<tr>
<th>Description</th>
<th>Total This Period</th>
<th>Election Cycle-to-Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Dividends, Interest, etc.)</td>
<td>0.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4):

<table>
<thead>
<tr>
<th>Description</th>
<th>Total This Period</th>
<th>Election Cycle-to-Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>23960.07</td>
<td>31050.07</td>
</tr>
</tbody>
</table>
## II. DISBURSEMENTS

<table>
<thead>
<tr>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total This Period</strong></td>
<td><strong>Election Cycle-to-Date</strong></td>
</tr>
<tr>
<td>17. OPERATING EXPENDITURES</td>
<td>28239.00</td>
</tr>
<tr>
<td>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</td>
<td>0.00</td>
</tr>
<tr>
<td>19. LOAN REPAYMENTS:</td>
<td></td>
</tr>
<tr>
<td>(a) Of Loans Made or Guaranteed by the Candidate</td>
<td>0.00</td>
</tr>
<tr>
<td>(b) Of All Other Loans</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))</td>
<td>0.00</td>
</tr>
<tr>
<td>20. REFUNDS OF CONTRIBUTIONS TO:</td>
<td></td>
</tr>
<tr>
<td>(a) Individuals/Persons Other Than Political Committees</td>
<td>0.00</td>
</tr>
<tr>
<td>(b) Political Party Committees</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) Other Political Committees (such as PACs)</td>
<td>0.00</td>
</tr>
<tr>
<td>(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))</td>
<td>0.00</td>
</tr>
<tr>
<td>21. OTHER DISBURSEMENTS</td>
<td>0.00</td>
</tr>
<tr>
<td>22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)</td>
<td>28239.00</td>
</tr>
</tbody>
</table>

## III. CASH SUMMARY

<table>
<thead>
<tr>
<th>COLUMN A</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CASH ON HAND AT BEGINNING OF REPORTING PERIOD</strong></td>
</tr>
<tr>
<td><strong>TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)</strong></td>
</tr>
<tr>
<td><strong>SUBTOTAL (add Line 23 and Line 24)</strong></td>
</tr>
<tr>
<td><strong>TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</strong></td>
</tr>
<tr>
<td><strong>CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)</strong></td>
</tr>
<tr>
<td>Full Name (Last, First, Middle Initial)</td>
</tr>
<tr>
<td>--------------------------------------</td>
</tr>
<tr>
<td><strong>A. DAVID BEZANSON</strong></td>
</tr>
<tr>
<td>Mailing Address: 55 RUNNELLS ROAD</td>
</tr>
<tr>
<td>City: CONCORD</td>
</tr>
<tr>
<td>FEC ID number of contributing federal political committee:</td>
</tr>
<tr>
<td>Name of Employer</td>
</tr>
<tr>
<td>Receipt For: 2014</td>
</tr>
<tr>
<td>Primary</td>
</tr>
<tr>
<td>225.00</td>
</tr>
<tr>
<td><strong>B. DAN BEZON</strong></td>
</tr>
<tr>
<td>Mailing Address: 171 KEARSARGE MOUNTAIN RD.</td>
</tr>
<tr>
<td>City: ANDOVER</td>
</tr>
<tr>
<td>FEC ID number of contributing federal political committee:</td>
</tr>
<tr>
<td>Name of Employer</td>
</tr>
<tr>
<td>Receipt For: 2014</td>
</tr>
<tr>
<td>Primary</td>
</tr>
<tr>
<td>210.00</td>
</tr>
<tr>
<td><strong>C. DAN BEZON</strong></td>
</tr>
<tr>
<td>Mailing Address: 171 KEARSARGE MOUNTAIN RD.</td>
</tr>
<tr>
<td>City: ANDOVER</td>
</tr>
<tr>
<td>FEC ID number of contributing federal political committee:</td>
</tr>
<tr>
<td>Name of Employer</td>
</tr>
<tr>
<td>Receipt For: 2014</td>
</tr>
<tr>
<td>Primary</td>
</tr>
<tr>
<td>250.00</td>
</tr>
<tr>
<td><strong>SUBTOTAL of Receipts This Page (optional):</strong></td>
</tr>
<tr>
<td><strong>TOTAL This Period (last page this line number only):</strong></td>
</tr>
</tbody>
</table>
SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)  
FRIENDS OF KAREN TESTERMAN

Full Name (Last, First, Middle Initial)  
DAN BEZON

Mailing Address  
171 KEARSARGE MOUNTAIN RD.

City  
ANDOVER  
State  
NH  
Zip Code  
03216

FEC ID number of contributing federal political committee.  
C

Name of Employer  
SELF-EMPLOYED

Occupation  
CHIROPRACTOR

Receipt For: 2014  
X Primary  
Other (specify)  
General

Date of Receipt  
10 / 16 / 2013

Transaction ID: SA11AI.4403

Amount of Each Receipt this Period  
CONTRIBUTION  
40.00

Election Cycle-to-Date  
250.00

Full Name (Last, First, Middle Initial)  
DAN BEZON

Mailing Address  
171 KEARSARGE MOUNTAIN RD.

City  
ANDOVER  
State  
NH  
Zip Code  
03216

FEC ID number of contributing federal political committee.  
C

Name of Employer  
SELF-EMPLOYED

Occupation  
CHIROPRACTOR

Receipt For: 2014  
X Primary  
Other (specify)  
General

Date of Receipt  
10 / 16 / 2013

Transaction ID: SA11AI.4404

Amount of Each Receipt this Period  
CONTRIBUTION  
40.00

Election Cycle-to-Date  
330.00

Full Name (Last, First, Middle Initial)  
DAN BEZON

Mailing Address  
171 KEARSARGE MOUNTAIN RD.

City  
ANDOVER  
State  
NH  
Zip Code  
03216

FEC ID number of contributing federal political committee.  
C

Name of Employer  
SELF-EMPLOYED

Occupation  
CHIROPRACTOR

Receipt For: 2014  
X Primary  
Other (specify)  
General

Date of Receipt  
10 / 16 / 2013

Transaction ID: SA11AI.4405

Amount of Each Receipt this Period  
CONTRIBUTION  
40.00

Election Cycle-to-Date  
370.00

SUBTOTAL of Receipts This Page (optional)  

TOTAL This Period (last page this line number only)  
120.00
## SCHEDULE A (FEC Form 3)
### ITEMIZED RECEIPTS

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Date of Receipt</th>
<th>Transaction ID</th>
<th>Amount of Each Receipt this Period</th>
<th>For Line Number (check only one)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DAN BEZON</strong></td>
<td>171 KEARSARGE MOUNTAIN RD.</td>
<td></td>
<td></td>
<td></td>
<td>10/03/2013</td>
<td>SA11AI4449</td>
<td>40.00</td>
<td>11a</td>
</tr>
<tr>
<td><strong>FRIENDS OF KAREN TESTERMAN</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>11b, 11c, 11d</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12, 13a, 13b, 13c, 14</td>
</tr>
</tbody>
</table>

- **FEC ID number of contributing federal political committee.**
- **Name of Employer:** SELF-EMPLOYED
- **Occupation:** CHIROPRACTOR
- **Receipt For:** 2014
  - Primary: 
  - General: 
  - Other (specify): Election Cycle-to-Date: 410.00

---

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Date of Receipt</th>
<th>Transaction ID</th>
<th>Amount of Each Receipt this Period</th>
<th>For Line Number (check only one)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DAN BEZON</strong></td>
<td>171 KEARSARGE MOUNTAIN RD.</td>
<td></td>
<td></td>
<td></td>
<td>11/05/2013</td>
<td>SA11AI4457</td>
<td>40.00</td>
<td>11a</td>
</tr>
<tr>
<td><strong>FRIENDS OF KAREN TESTERMAN</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>11b, 11c, 11d</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12, 13a, 13b, 13c, 14</td>
</tr>
</tbody>
</table>

- **FEC ID number of contributing federal political committee.**
- **Name of Employer:** SELF-EMPLOYED
- **Occupation:** CHIROPRACTOR
- **Receipt For:** 2014
  - Primary: 
  - General: 
  - Other (specify): Election Cycle-to-Date: 450.00

---

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Date of Receipt</th>
<th>Transaction ID</th>
<th>Amount of Each Receipt this Period</th>
<th>For Line Number (check only one)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DAN BEZON</strong></td>
<td>171 KEARSARGE MOUNTAIN RD.</td>
<td></td>
<td></td>
<td></td>
<td>11/05/2013</td>
<td>SA11AI4458</td>
<td>40.00</td>
<td>11a</td>
</tr>
<tr>
<td><strong>FRIENDS OF KAREN TESTERMAN</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>11b, 11c, 11d</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12, 13a, 13b, 13c, 14</td>
</tr>
</tbody>
</table>

- **FEC ID number of contributing federal political committee.**
- **Name of Employer:** SELF-EMPLOYED
- **Occupation:** CHIROPRACTOR
- **Receipt For:** 2014
  - Primary: 
  - General: 
  - Other (specify): Election Cycle-to-Date: 490.00

---

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

**TOTAL This Period (last page this line number only):** 120.00
### SCHEDULE A (FEC Form 3)
**ITEMIZED RECEIPTS**

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 committees.

**NAME OF COMMITTEE (in Full)**
FRIENDS OF KAREN TESTERMAN

**Full Name (Last, First, Middle Initial)**
DAN BEZON

**Mailing Address**
171 KEARSARGE MOUNTAIN RD.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANDOVER</td>
<td>NH</td>
<td>03216</td>
</tr>
</tbody>
</table>

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

- [ ]

**Name of Employer**
SELF-EMPLOYED

**Occupation**
CHIROPRACTOR

**Receipt For:**
2014
- [x] Primary
- [ ] General
- [ ] Other (specify)

**Amount of Each Receipt this Period**

- [ ]

**Date of Receipt**
11/22/2013

**Transaction ID:** SA11AI4478

---

**Full Name (Last, First, Middle Initial)**
DAN BEZON

**Mailing Address**
171 KEARSARGE MOUNTAIN RD.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANDOVER</td>
<td>NH</td>
<td>03216</td>
</tr>
</tbody>
</table>

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

- [ ]

**Name of Employer**
SELF-EMPLOYED

**Occupation**
CHIROPRACTOR

**Receipt For:**
2014
- [x] Primary
- [ ] General
- [ ] Other (specify)

**Amount of Each Receipt this Period**

- [ ]

**Date of Receipt**
12/30/2013

**Transaction ID:** SA11AI4482

---

**Full Name (Last, First, Middle Initial)**
BRIAN COUTURE

**Mailing Address**
13337 NW 15TH CT

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>PEMBROKE PINES</td>
<td>FL</td>
<td>33028</td>
</tr>
</tbody>
</table>

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

- [ ]

**Name of Employer**
INFORMATION REQUESTED

**Occupation**
INFORMATION REQUESTED

**Receipt For:**
2014
- [x] Primary
- [ ] General
- [ ] Other (specify)

**Amount of Each Receipt this Period**

- [ ]

**Date of Receipt**
12/03/2013

**Transaction ID:** SA11AI4519

---

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

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

---

FEC Schedule A (Form 3) (Revised 02/2009)
### SCHEDULE A (FEC Form 3)

#### ITEMIZED RECEIPTS

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

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#### NAME OF COMMITTEE (in Full)

**FRIENDS OF KAREN TESTERMAN**

#### A. RALPH J. DEMICCO

**Mailing Address:** 255 CHESTER TURNPIKE

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>CANDIA</td>
<td>NH</td>
<td>93034</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Transaction ID:</th>
<th>SA11AL4358</th>
</tr>
</thead>
</table>

**Amount of Each Receipt this Period**

1000.00

#### B. FRANCIE HUNTER

**Mailing Address:** PO BOX 501

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>RYE BEACH</td>
<td>NH</td>
<td>90204</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Transaction ID:</th>
<th>SA11AL4377</th>
</tr>
</thead>
</table>

**Amount of Each Receipt this Period**

250.00

#### C. MARGARET HURVITZ

**Mailing Address:** 169 CAMELOT SHORE DR

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>FARMINGTON</td>
<td>NH</td>
<td>03835</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Transaction ID:</th>
<th>SA11AL4416</th>
</tr>
</thead>
</table>

**Amount of Each Receipt this Period**

10.00

---

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

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

1260.00

---

FEC Schedule A (Form 3) (Revised 02/2009)
### SCHEDULE A (FEC Form 3)

#### ITEMIZED RECEIPTS

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#### NAME OF COMMITTEE (in Full)

**FRIENDS OF KAREN TESTERMAN**

#### Full Name (Last, First, Middle Initial)

**MARGARET HURVITZ**

- **Mailing Address**: 169 CAMELOT SHORE DR.
- **City**: FARMINGTON
- **State**: NH
- **Zip Code**: 03835
- **Date of Receipt**: 10/16/2013
- **Transaction ID**: SA11AI14416
- **Amount of Each Receipt this Period**: 50.00

#### Receipt Information
- **FEC ID number of contributing federal political committee**: C
- **Name of Employer**: N/A
- **Occupation**: RETIRED
- **Receipt For**: 2014
- **Primary**: 
- **General**: 
- **Other (specify)**: 
- **Election Cycle-to-Date**: 360.00

---

#### Full Name (Last, First, Middle Initial)

**JOHN W KIMBALL Jr.**

- **Mailing Address**: 24 ISAAC LUCAS CIR
- **City**: DOVER
- **State**: NH
- **Zip Code**: 03820
- **Date of Receipt**: 12/30/2013
- **Transaction ID**: SA11AI14494
- **Amount of Each Receipt this Period**: 200.00

#### Receipt Information
- **FEC ID number of contributing federal political committee**: C
- **Name of Employer**: SELF
- **Occupation**: INFORMATION REQUESTED
- **Receipt For**: 2014
- **Primary**: 
- **General**: 
- **Other (specify)**: 
- **Election Cycle-to-Date**: 260.00

---

#### Full Name (Last, First, Middle Initial)

**JOHN W KIMBALL Jr.**

- **Mailing Address**: 24 ISAAC LUCAS CIR
- **City**: DOVER
- **State**: NH
- **Zip Code**: 03820
- **Date of Receipt**: 12/30/2013
- **Transaction ID**: SA11AI14495
- **Amount of Each Receipt this Period**: 200.00

#### Receipt Information
- **FEC ID number of contributing federal political committee**: C
- **Name of Employer**: SELF
- **Occupation**: INFORMATION REQUESTED
- **Receipt For**: 2014
- **Primary**: 
- **General**: 
- **Other (specify)**: 
- **Election Cycle-to-Date**: 450.00

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

**TOTAL This Period (last page this line number only):** ..........................................................
### SCHEDULE A (FEC Form 3)

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: 11a 11b 11c 11d
12 13a 13b 14 15

**FOR LINE NUMBER: PAGE 11 OF 27**

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---

### A. FRIENDS OF KAREN TESTERMAN

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

**Mailing Address:** 47 HEARTSIDE CIRCLE

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Name of Employer: INFORMATION REQUESTED

**Occupation:** INFORMATION REQUESTED

**Receipt For:** 2014

- Primary
- General
- Other (specify)

**Date of Receipt:** 11/22/2013

**Transaction ID:** SA11AI4483

**Amount of Each Receipt this Period:** 500.00

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### B. DONALD L ONOFRIO

**Full Name (Last, First, Middle Initial):** DONALD L ONOFRIO

**Mailing Address:** PO BOX 7041

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**Name of Employer:**

**Occupation:** RETIRED

**Receipt For:** 2014

- Primary
- General
- Other (specify)

**Date of Receipt:** 11/15/2013

**Transaction ID:** SA11AI4476

**Amount of Each Receipt this Period:** 1000.00

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### C. GREGORY PARKER

**Full Name (Last, First, Middle Initial):** GREGORY PARKER

**Mailing Address:** 37 THORNTON FERRY RD II

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**Name of Employer:**

**Occupation:** INFORMATION REQUESTED

**Receipt For:** 2014

- Primary
- General
- Other (specify)

**Date of Receipt:** 12/31/2013

**Transaction ID:** SA11AI4543

**Amount of Each Receipt this Period:** 500.00

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

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#### NAME OF COMMITTEE (in Full)

FRIENDS OF KAREN TESTERMAN

#### Full Name (Last, First, Middle Initial)

**A. RAYMOND B RUDDY**

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#### Full Name (Last, First, Middle Initial)

**B. PAULA JONES TARTA**

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#### Full Name (Last, First, Middle Initial)

**C. PAULA JONES TARTA**

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Election Cycle-to-Date

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| 14020031130 | 1500.00 |

FEC Schedule A (Form 3) (Revised 02/2009)
## SCHEDULE A (FEC Form 3)

### ITEMIZED RECEIPTS

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

### NAME OF COMMITTEE (in Full)

**FRIENDS OF KAREN TESTERMAN**

#### A. DONALD S. TERASAKI

- **Mailing Address:** 7634 NORTH GATE RD.
- **City:** ROSCOE
- **State:** IL
- **Zip Code:** 61073

**FEC ID number of contributing federal political committee:**

**Name of Employer:**

**Occupation:** RETIRED

**Receipt For:** 2014

- **Primary**
- **Other (specify):**

- **Election Cycle-to-Date:** 350.00

#### B. DAVID TESTERMAN

- **Mailing Address:** PO BOX 3784
- **City:** NASHUA
- **State:** NH
- **Zip Code:** 03302

**FEC ID number of contributing federal political committee:**

**Name of Employer:** INFORMATION REQUESTED

**Occupation:** INFORMATION REQUESTED

**Receipt For:** 2014

- **Primary**
- **Other (specify):**

- **Election Cycle-to-Date:** 2600.00

#### C. WILLIAM WICHTERMAN

- **Mailing Address:** 10157 PALMER DRIVE
- **City:** OAKTON
- **State:** VA
- **Zip Code:** 22124

**FEC ID number of contributing federal political committee:**

**Name of Employer:** INFORMATION REQUESTED

**Occupation:** INFORMATION REQUESTED

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- **Primary**
- **Other (specify):**

- **Election Cycle-to-Date:** 250.00

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**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

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

**NAME OF COMMITTEE (in Full)**

**FRIENDS OF KAREN TESTERMAN**

**A. SANDRA ZIEHM FOR COMMISSIONER**

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**Name of Employer**

**Occupation**

**Receipt For:** 2014

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**Date of Receipt**

12 / 13 / 2013

**Transaction ID:** SA11C4553

**Amount of Each Receipt this Period**

600.00

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**Name of Employer**

**Occupation**

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**Date of Receipt**

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**Name of Employer**

**Occupation**

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

600.00

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FEC Schedule A (Form 3) (Revised 02/2009)
## SCHEDULE A (FEC Form 3)

### ITEMIZED RECEIPTS

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<tr>
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**TOTAL** This Period (last page this line number only) ........................................... 3000.00
SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
FRIENDS OF KAREN TESTERMAN

Full Name (Last, First, Middle Initial)
KAREN TESTERMAN

Mailing Address
PO BOX 3874

A. Date of Receipt
[ ] 11 / [ ] 15 / 2013
Transaction ID: SA13A.4310

FEC ID number of contributing federal political committee:
C S4NH00104

Name of Employer

Receipt For: 2014
[ ] Primary [ ] General
[ ] Other (specify)

Election Cycle-to-Date
8010.00

Amount of Each Receipt this Period
5000.00

CANDIDATE LOAN FROM PERSONAL FUNDS

Full Name (Last, First, Middle Initial)
KAREN TESTERMAN

B. Date of Receipt
[ ] 12 / [ ] 12 / 2013
Transaction ID: SA13A.4319

FEC ID number of contributing federal political committee:
C S4NH00104

Name of Employer

Receipt For: 2014
[ ] Primary [ ] General
[ ] Other (specify)

Election Cycle-to-Date
8010.00

Amount of Each Receipt this Period
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CANDIDATE LOAN FROM PERSONAL FUNDS

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
KAREN TESTERMAN

C. Date of Receipt
[ ] 12 / [ ] 19 / 2013
Transaction ID: SA13A.4321

FEC ID number of contributing federal political committee:
C S4NH00104

Name of Employer

Receipt For: 2014
[ ] Primary [ ] General
[ ] Other (specify)

Election Cycle-to-Date
8010.00

Amount of Each Receipt this Period
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CANDIDATE LOAN FROM PERSONAL FUNDS

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

FEC Schedule A (Form 3) (Revised 02/2009)
**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**

---

**NAME OF COMMITTEE (in Full)**  
FRIENDS OF KAREN TESTERMAN

**Full Name (Last, First, Middle Initial)**  
A. DEBORAH HENSEL

**Mailing Address**  
PO BOX 3874

**City**  
CONCORD

**State**  
NH

**Zip Code**  
03302

**Purpose of Disbursement**  
POLITICAL STRATEGY CONSULTING

**Candidate Name**

Office Sought:  
House

Disbursement For:  
Primary

State:  

District:  

**Date of Disbursement**  
10 / 25 / 2013

**Amount of Each Disbursement this Period**  
5000.00

**Transaction ID:** SB17.4302

---

**Full Name (Last, First, Middle Initial)**  
B. DEBORAH HENSEL

**Mailing Address**  
PO BOX 3874

**City**  
CONCORD

**State**  
NH

**Zip Code**  
03302

**Purpose of Disbursement**  
POLITICAL STRATEGY CONSULTING

**Candidate Name**

Office Sought:  
Senate

Disbursement For:  
Primary

State:  

District:  

**Date of Disbursement**  
11 / 07 / 2013

**Amount of Each Disbursement this Period**  
2500.00

**Transaction ID:** SB17.4304

---

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

**Mailing Address**  
PO BOX 3874

**City**  
CONCORD

**State**  
NH

**Zip Code**  
03302

**Purpose of Disbursement**  
POLITICAL STRATEGY CONSULTING

**Candidate Name**

Office Sought:  
Senate

Disbursement For:  
Primary

State:  

District:  

**Date of Disbursement**  
12 / 02 / 2013

**Amount of Each Disbursement this Period**  
2500.00

**Transaction ID:** SB17.4305

---

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

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

10000.00

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*FEC Schedule B (Form 3) (Revised 02/2009)*
## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

### NAME OF COMMITTEE (In Full)

**FRIENDS OF KAREN TESTERMAN**

### A. MATTHEAU LEDUC

<table>
<thead>
<tr>
<th>Mailing Address</th>
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</thead>
<tbody>
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<tr>
<td>DOVER</td>
<td>NH</td>
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**Purpose of Disbursement**

POLITICAL STRATEGY CONSULTING

**Candidate Name**

<table>
<thead>
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<th>Category/Type</th>
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**Office Sought:**

- House
  - Senate
  - President

- Disbursement For:
  - Primary
  - General
  - Other (specify)

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**Amount of Each Disbursement this Period**

- 2000.00

**Transaction ID:** SB17.4291

### B. MATTHEAU LEDUC

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**Purpose of Disbursement**

POLITICAL STRATEGY CONSULTING

**Candidate Name**

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**Office Sought:**

- House
  - Senate
  - President

- Disbursement For:
  - Primary
  - General
  - Other (specify)

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**Amount of Each Disbursement this Period**

- 3000.00

**Transaction ID:** SB17.4299

### C. MATTHEAU LEDUC

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**Purpose of Disbursement**

POLITICAL STRATEGY CONSULTING

**Candidate Name**

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**Office Sought:**

- House
  - Senate
  - President

- Disbursement For:
  - Primary
  - General
  - Other (specify)

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**Amount of Each Disbursement this Period**

- 3000.00

**Transaction ID:** SB17.4292

### SUBTOTAL of Disbursements This Page (optional)

- 8000.00

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

- 8000.00

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**FEC Schedule B (Form 3) (Revised 02/2003)**
ITEMIZED DISBURSEMENTS

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A. MATTHEAU LEDUC

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Transaction ID: SB17.4293

B. MATTHEAU LEDUC

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Transaction ID: SB17.4296

C. JONATHAN MEADOWS

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<td>CONCORD</td>
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Transaction ID: SB17.4306

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

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

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FEC Schedule B (Form 3) (Revised 02/2009)
### SCHEDULE B (FEC Form 3)
#### ITEMIZED DISBURSEMENTS

**NAME OF COMMITTEE (in Full)**

**FRIENDS OF KAREN TESTERMAN**

**A. JONATHAN MEADOWS**

- **Mailing Address**: PO BOX 3874
- **City**: CONCORD
- **State**: NH
- **Zip Code**: 03302
- **Purpose of Disbursement**: POLITICAL STRATEGY CONSULTING
- **Date of Disbursement**: 12/30/2013
- **Amount of Each Disbursement this Period**: $2000.00
- **Transaction ID**: SB17.4308

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<td>House</td>
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<tr>
<td>Senate</td>
<td>Other (specify)</td>
</tr>
<tr>
<td>President</td>
<td>Primary</td>
</tr>
</tbody>
</table>

**B.**

- **Mailing Address**:  
- **City**:  
- **State**:  
- **Zip Code**:  
- **Purpose of Disbursement**:  
- **Date of Disbursement**:  
- **Amount of Each Disbursement this Period**:  

**C.**

- **Mailing Address**:  
- **City**:  
- **State**:  
- **Zip Code**:  
- **Purpose of Disbursement**:  
- **Date of Disbursement**:  
- **Amount of Each Disbursement this Period**:  

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

$2000.00

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

$26000.00
**SCHEDULE C (FEC Form 3)**

**LOANS**

**NAME OF COMMITTEE (In Full)**
FRIENDS OF KAREN TESTERMAN

**LOAN SOURCE** Full Name (Last, First, Middle Initial)
KAREN TESTERMAN

**Mailing Address**
PO BOX 3874

**City**
CONCORD

**State**
NH

**ZIP Code**
03302

<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
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<td>3000.00</td>
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<td>0.00% (apr)</td>
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**Secured:** Yes [x] No

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

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

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

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

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

---

**SUBTOTALS** This Period This Page (optional) ................................................................. →

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

---

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**SCHEDULE C (FEC Form 3)**

**LOANS**

**NAME OF COMMITTEE (In Full)**
FRIENDS OF KAREN TESTERMAN

**TRANSACTION ID:** SC/104315

**ELECTION:** 2014

**LOAN SOURCE** Full Name (Last, First, Middle Initial)
KAREN TESTERMAN

<table>
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<th>Mailing Address</th>
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<tbody>
<tr>
<td>PO BOX 3874</td>
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<table>
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<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
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**TERMS**

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<td>11 2013</td>
<td>ON DEMAND</td>
<td>0.00% (apr)</td>
<td>Yes</td>
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List All Endorsers or Guarantors (if any) to Loan Source

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

<table>
<thead>
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<table>
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2. **Full Name (Last, First, Middle Initial)**

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

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

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**SUBTOTALS** This Period This Page (optional)

**TOTALS** This Period (last page in this line only)

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**Note:** Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
# SCHEDULE C (FEC Form 3)

## LOANS

**NAME OF COMMITTEE** (in Full)

**FRIENDS OF KAREN TESTERMAN**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**KAREN TESTERMAN**

**Mailing Address**

PO BOX 3874

**City**

**State**

**ZIP Code**

- CONCORD
- NH
- 03302

**Original Amount of Loan**

- 599.85

**Cumulative Payment To Date**

- 0.00

**Balance Outstanding at Close of This Period**

- 599.85

**TERMS**

- Date Incurred: 11/14/2013
- Date Due: ON DEMAND
- Interest Rate: 0.00%
- Secured: Yes

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

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

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

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

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

## SUBTOTALS This Period This Page (optional)

- 0.00

## TOTALS This Period (last page in this line only)

- 0.00

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 (FEC Form 3)**

**LOANS**

**NAME OF COMMITTEE (In Full)**

FRIENDS OF KAREN TESTERMAN

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

KAREN TESTERMAN

Mailing Address

PO BOX 3874

<table>
<thead>
<tr>
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**[PERSONAL FUNDS]**

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**Balance Outstanding at Close of This Period**

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**TERMS**

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<tr>
<td>M / T / 15</td>
<td>ON DEMAND</td>
<td>0.00% (apr)</td>
<td>√</td>
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</tbody>
</table>

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

1. **Full Name (Last, First, Middle Initial)**
   
   **Mailing Address**

   **City**

   **State**

   **ZIP Code**

   **Name of Employer**

   **Occupation**

   **Amount Guaranteed Outstanding:**

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

   **Mailing Address**

   **City**

   **State**

   **ZIP Code**

   **Name of Employer**

   **Occupation**

   **Amount Guaranteed Outstanding:**

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

   **Mailing Address**

   **City**

   **State**

   **ZIP Code**

   **Name of Employer**

   **Occupation**

   **Amount Guaranteed Outstanding:**

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

   **Mailing Address**

   **City**

   **State**

   **ZIP Code**

   **Name of Employer**

   **Occupation**

   **Amount Guaranteed Outstanding:**

**SUBTOTALS** This Period This Page (optional)

**TOTALS** This Period (last page in this line only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**SCHEDULE C (FEC Form 3)**

**LOANS**

**NAME OF COMMITTEE (in Full)**
FRIENDS OF KAREN TESTERMAN

**LOAN SOURCE** Full Name (Last, First, Middle Initial)
KAREN TESTERMAN

**Mailing Address**
PO BOX 3874

**City** CONCORD  
**State** NH  
**ZIP Code** 03302

**Original Amount of Loan** 400.00

**Election** 2014

**PERSONAL FUNDS**

**Date Incurred** M-12  
**Date Due** M-03

**Terms**

**Interest Rate** 0.00% (apr)

**Secured:** Yes

**Balance Outstanding at Close of This Period** 400.00

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

1. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

2. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

3. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

4. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

**SUBTOTALS** This Period This Page (optional)

**TOTALS** This Period (last page in this line only)

**SUBTOTALS**

**0.00**

**TOTALS**

**0.00**

*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 (FEC Form 3)**

**LOANS**

**NAME OF COMMITTEE (in Full)**
FRIENDS OF KAREN TESTERMAN

**TRANSACTION ID**: SC/10.4321

**LOAN SOURCE** Full Name (Last, First, Middle Initial)
KAREN TESTERMAN

**Mailing Address**
PO BOX 3974

**City** CONCORD  **State** NH  **ZIP Code** 03302

<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>173.75</td>
<td>0.00</td>
<td>173.75</td>
</tr>
</tbody>
</table>

**Election** 2014

<table>
<thead>
<tr>
<th>[PERSONAL FUNDS]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary</td>
</tr>
</tbody>
</table>

**TERMS**

**Date Incurred** M M / D D / Y Y Y Y | **Date Due** M M / D D / Y Y Y Y | **Interest Rate** 0.00 % (apr) | **Secured** Yes | No

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

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

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

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

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

**SUBTOTALS This Period This Page (optional):**

0.00

**TOTALS This Period (last page in this line only):**

8000.00

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

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

Mailing Address: PO BOX 3674

City: DOVER   State: NH   Zip Code: 03821

Nature of Debt (Purpose):
   POLITICAL STRATEGY CONSULTING

Outstanding Balance Beginning This Period: 2000.00

Amount Incurred This Period: 0.00

Payment This Period: 2000.00

Outstanding Balance at Close of This Period: 0.00

Transaction ID: SD10.4178

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

Mailing Address:

City: State: Zip Code:

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Mailing Address:

City: State: Zip Code:

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)

2) TOTALS This Period (last page this line number only)

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)
**United States Senate**
**Office of the Secretary**
**Office of Public Records**

**The Preceding Document Was Hand Delivered**

**Date of Receipt:** 1-31-14

**USPS First Class Mail**

**Postmark**

**USPS Registered/Certified**

**Postmark**

**USPS Priority Mail**

**Postmark**

**Delivery Confirmation or Signature Confirmation Label**

**USPS Express Mail**

**Postmark**

**Overnight Delivery Service:**

**Shipping Date**

**Next Business Day Delivery**

**Federal Express**

***

**UPS**

***

**DHL**

***

**Airborne Express**

***

**Received From Federal Election Commission**

**Date of Receipt**

**Postmark Illegible**

***

**No Postmark**

***

**Fax**

**Date of Receipt**

**Other**

**Date of Receipt or Postmark**

**Preparer:** DH

**Date Prepared:** 1-31-14