

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

2014 JUL 11 Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

120445 CENTER

Organizations For Congress

ADDRESS (number and street)

56 Basiswood Road

Check if different than previously reported. (ACC)

Farmington

CT

06032

FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00329433

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

CT

05

TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM

DD

YYYYYY

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM

DD

YYYYYY

in the State of

5. Covering Period

04

01

2014

through

06

30

2014

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

Andrew G. Andrews

Signature of Treasurer

[Handwritten Signature]

Date

07

09

2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

Giannaros For Congress

Report Covering the Period: From:

MM ' DD ' YYYY
04 ' 01 ' 2014

To:

MM ' DD ' YYYY
06 ' 30 ' 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))

[Empty box for Column A]

[Empty box for Column B]

(b) Total Contribution Refunds
(from Line 20(d))

[Empty box for Column A]

[Empty box for Column B]

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

[Empty box for Column A]

[Empty box for Column B]

Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

[Box with handwritten value: 4,800]

[Box with handwritten value: 21,100]

(b) Total Offsets to Operating
Expenditures (from Line 14)

[Empty box for Column A]

[Empty box for Column B]

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

[Empty box for Column A]

[Empty box for Column B]

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

[Box with handwritten value: 16,172.7]

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

[Empty box for Column A]

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

[Empty box for Column A]

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	48,000	2,110.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS	2,250.00	2,250.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	2,298.00	2,461.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3,915.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.9
25. SUBTOTAL (add Line 23 and Line 24).....	3,915.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2,298.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	1,617.27

**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 1 OF 2

<input type="checkbox"/> 17	<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 checked="" 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 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)

Giannaros For Congress

Full Name (Last, First, Middle Initial)

A. *Blumenthal For Connecticut*

Mailing Address

777 Summer St.

City *Stamford* State *CT* Zip Code *06901*

Purpose of Disbursement
Political Contribution

Candidate Name
Richard Blumenthal

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: *CT* District:

Category/
Type
011

Date of Disbursement

06 / 20 / 2014

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

Carggs For Congress

Mailing Address

2450 Louisiana St

City *Houston* State *TX* Zip Code *77065*

Purpose of Disbursement
Political Contribution

Candidate Name
James P. Carggs

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: *TX* District: *7*

Category/
Type
011

Date of Disbursement

06 / 20 / 2014

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. *DSCC - Federal Treasurer Emma Pierce*

Mailing Address

30 Arbor St.

City *Hartford* State *CT* Zip Code *06106*

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Category/
Type
011

Date of Disbursement

06 / 20 / 2014

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1500.00

1500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

<input type="checkbox"/> 17	<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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Giannaros For Congress

Full Name (Last, First, Middle Initial)

A. *Ready For Hillary PAC*

Mailing Address

P.O. Box 7705

City

McLean

State

VA

Zip Code

22106

Purpose of Disbursement

Political Contribution

0.1.1

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MEM / DDD / YYYYYY
06 / 20 / 2014

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional).....▶

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

2250.00

CONFIDENTIAL

POSTNET-POSTNET

Ginnacas For Congress
56 Basswood Road
Farmington, CT 06032

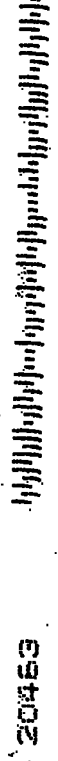
Return
Receipt
Requested



7004 1350 0003 6979 0844



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



20463

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7/9/14
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

[Handwritten Signature]

PREPARER
(8/2013)

7/14/14

DATE PREPARED

OUT-COMM-10041