

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

Office Use Only

2017 OCT 17 11:45

12EE4M5  
FEDERAL MAIL CENTER

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

Giannaros For Congress

ADDRESS (number and street)

56 Basswood Road

Check if different than previously reported. (ACC)

Farmington CT 06032

FEC IDENTIFICATION NUMBER

C00329433

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CT

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

in the State of

CT

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

General (30G)

Runoff (30R)

Special (30S)

Election on

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

in the State of

CT

5. Covering Period

07

01

2012

through

09

30

2012

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

Type or Print Name of Treasurer

Andrew G. Andrews

Signature of Treasurer

[Handwritten Signature]

Date

10

12

2012

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

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

*Giannaros For Congress*

Report Covering the Period:

From:

**MM** ' **DD** ' **YYYY**  
*07* ' *01* ' *2012*

To:

**MM** ' **DD** ' **YYYY**  
*09* ' *30* ' *2012*

**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)) ....
- (b) Total Contribution Refunds  
(from Line 20(d)) .....
- (c) Net Contributions (other than loans)  
(subtract Line 6(b) from Line 6(a)) .....

.....

.....

.....

.....

.....

.....

Net Operating Expenditures

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

..... *300*

..... *300*

.....

.....

..... *300*

..... *300*

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

..... *6,612.45*

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

.....

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

.....

**For further information contact:**

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

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

12070913210

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

*Giannaros For Congress*

Report Covering the Period: From: 

MM	DD	YYYY
07	01	2012

 To: 

MM	DD	YYYY
09	30	2012

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

12030913211

(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....		
(iii) TOTAL of contributions from individuals .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) The Candidate .....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(ii), (b), (c), and (d))..		

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
--	--	--

13. LOANS:		
(a) Made or Guaranteed by the Candidate .....		
(b) All Other Loans .....		
(c) TOTAL LOANS (add Lines 13(a) and (b)) .....		

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
--	--	--

15. OTHER RECEIPTS (Dividends, Interest, etc.) <i>Interest</i> .....	1.10	88.6
--	------	------

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) .....	1.10	88.6
--	------	------

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

*Bank Service Fees*

17. OPERATING EXPENDITURES.....

3.00

3.00

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)).....

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 .....

40,000.00

40,000.00

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

40,003.00

40,003.00

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

46,614.35

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

1.10

25. SUBTOTAL (add Line 23 and Line 24).....

46,615.45

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

40,003.00

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD  
(subtract Line 26 from Line 25) .....

6,612.45

12030901212

**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 4

17  
20a  18  
20b  19a  
20c  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)

*Giannaros for Congress*

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM ' DD ' YYYY  
09 ' 07 ' 2012

A. *Berkley For Senate*

Mailing Address

*7437 S. Eastern Ave, Suite 427*

City  
*Las Vegas*

State  
*NV*

Zip Code  
*89123*

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement

*Political Contribution*

011  
Category/  
Type

Candidate Name

*Shelley Berkley*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: *NV*

District:

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

Full Name (Last, First, Middle Initial)

*Titus For Congress*

Mailing Address

*P.O. Box 72454*

City  
*Las Vegas*

State  
*NV*

Zip Code  
*89170*

Date of Disbursement

MM ' DD ' YYYY  
09 ' 07 ' 2012

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement

*Political Contribution*

011  
Category/  
Type

Candidate Name

*Dina Titus*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: *NV*

District: *1*

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

Full Name (Last, First, Middle Initial)

C. *Freinds of John Sarbanes*

Mailing Address

*P.O. Box 6854*

City  
*Towson*

State  
*MD*

Zip Code  
*21285*

Date of Disbursement

MM ' DD ' YYYY  
09 ' 07 ' 2012

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement

*Political Contribution*

011  
Category/  
Type

Candidate Name

*John Sarbanes*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: *MD*

District: *3*

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

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 4

17  18  19a  19b  
 20a  20b  20c  21

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NAME OF COMMITTEE (in Full)

*Giannaros For Congress*

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2012

A. *Cargas For Congress*

Mailing Address  
*2450 Louisiana St.*

City *Houston* State *TX* Zip Code *77006*

Purpose of Disbursement  
*Political Contribution*

Category/  
Type  
**011**

Amount of Each Disbursement this Period

**2,000.00**

Candidate Name  
*James P. Cargas*

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

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

State: *TX* District: *7*

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2012

*Priorities USA Action*

Mailing Address  
*1718 M Street NW #204*

City *Washington* State *DC* Zip Code *20036*

Purpose of Disbursement  
*Political Contribution*

Category/  
Type  
**011**

Amount of Each Disbursement this Period

**5,000.00**

Candidate Name

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

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

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2012

C. *Unity Fund*

Mailing Address  
*330 Main St.*

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

Purpose of Disbursement  
*Political Contribution*

Category/  
Type  
**011**

Amount of Each Disbursement this Period

**1,000.00**

Candidate Name

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

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

State: District:

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

**17,000.00**

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

**17,000.00**

12050913214

**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)

<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.** *Hellenic Society Paideia*

Mailing Address *28 Dog Lane*

City *Storrs* State *CT* Zip Code *06268*

Purpose of Disbursement *Charitable Donation*

012  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

MM /  DD /  YYYY  
*09 / 07 / 2012*

Amount of Each Disbursement this Period

\$ *5,000.00*

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

Full Name (Last, First, Middle Initial)

*St. George Cathedral*

Mailing Address *433 Fairfield Ave.*

City *Hartford* State *CT* Zip Code *06114*

Purpose of Disbursement *Charitable Donation*

012  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

MM /  DD /  YYYY  
*09 / 07 / 2012*

Amount of Each Disbursement this Period

\$ *5,000.00*

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

Full Name (Last, First, Middle Initial)

**C.** *DCCC*

Mailing Address *433 South Capital St.*

City *Washington* State *DC* Zip Code *20003*

Purpose of Disbursement *Political Contribution*

011  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

MM /  DD /  YYYY  
*09 / 07 / 2012*

Amount of Each Disbursement this Period

\$ *2,000.00*

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

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

\$ *12,000.00*

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

\$

12030913215

**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 **4** OF **4**

<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.** *Democratic Senatorial Campaign Committee*

Mailing Address  
*120 Maryland Ave. NE*

City *Washington* State *DC* Zip Code *20002*

Purpose of Disbursement  
*Political Contribution*

Candidate Name

Category/  
Type  
**011**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

**MM / DD / YYYY**  
**09 / 07 / 2012**

Amount of Each Disbursement this Period

**5000.00**

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

**MM / DD / YYYY**

Amount of Each Disbursement this Period

**0**

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

Full Name (Last, First, Middle Initial)

**C.** 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

**MM / DD / YYYY**

Amount of Each Disbursement this Period

**0**

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

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

**5000.00**

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

**40000.00**

102030913216



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.

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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*JAD*  
 PREPARER

*10/17/12*  
 DATE PREPARED

12030913217