

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

11 AUG 18 PM 1:10

Schiff for Senate
Summary Sheets for FEC Disclosure Report
4th Quarter 2010 (10/01 - 12/31/2010)
FEC Form 3

Andrew Schiff, Treasurer

49632307011

Schiff for Senate

Beginning Balance	Receipts	Disbursements	Ending Balance
BANK OF AMERICA - 1926	36,840.31	33,812.65	66,386.10
BANK OF AMERICA - EXPL	6,051.70	-	5,539.94
BANK OF AMERICA - 1832	966.00	-	52.00
TOTALS	43,858.01	33,812.65	71,978.04
			5,692.62

I. RECEIPTS	BoFA 1926	Exploratory	BoFA 1832	COLUMN A	COLUMN B
11. CONTRIBUTIONS					
(a) Individuals	16,812.65	-	-	16,812.65	2,879,042.57
(b) Political Party Cmtes	-	-	-	-	250.00
(c) PACs	-	-	-	-	3,167.27
(d) Candidate	-	-	-	-	-
(e) TOTAL CONTRIBUTIONS	16,812.65	-	-	16,812.65	2,882,459.84
12. AFFILIATED TRANSFERS	-	-	-	-	-
13. LOANS					
(a) Candidate	12,000.00	-	-	12,000.00	837,000.00
(b) All Other Loans	-	-	-	-	-
(c) TOTAL LOANS	12,000.00	-	-	12,000.00	837,000.00
14. OFFSETS TO EXPEND	-	-	-	-	4,291.28
15. OTHER RECEIPTS	-	-	-	-	-
16. TOTAL RECEIPTS	28,812.65	-	-	28,812.65	3,723,751.12
INTERNAL TRANSFERS	5,000.00	-	-	5,000.00	
BANK RECEIPTS	33,812.65	-	-	33,812.65	

Schiff for Senate

II. DISBURSEMENTS

	BofA 1926	Exploratory	BofA 1832	COLUMN A	COLUMN B
17. OPERATING EXPEND	10,857.10	539.94	52.00	11,449.04	3,532,679.50
18. AFFILIATED TRANSFERS	-	-	-	-	-
19. LOAN REPAYMENTS					
(a) Candidate	-	-	-	-	-
(b) All Other Loans	-	-	-	-	-
(c) TOTAL LOAN REPAY	-	-	-	-	-
20. CONTRIBUTION REFUNDS					
(a) Individuals	55,529.00	-	-	55,529.00	185,379.00
(b) Political Party Cmtes	-	-	-	-	-
(c) PACs	-	-	-	-	-
(d) Candidate	-	-	-	-	-
(e) TOTAL REFUNDS	55,529.00	-	-	55,529.00	185,379.00
21. OTHER DISBURSEMENTS	-	-	-	-	-

22. TOTAL DISBURSEMENTS	66,386.10	539.94	52.00	66,978.04	3,718,058.50
INTERNAL TRANSFERS	-	5,000.00	-	5,000.00	
BANK DISBURSEMENTS	66,386.10	5,539.94	52.00	71,978.04	

III. CASH SUMMARY

	Reporting Period	Campaign-to-Date
23. CASH ON HAND AT BEGINNING	\$ 43,858.01	\$ -
24. TOTAL RECEIPTS	\$ 28,812.65	\$ 3,723,751.12
25. SUBTOTAL	\$ 72,670.66	\$ 3,723,751.12
26. TOTAL DISBURSEMENTS	\$ 66,978.04	\$ 3,718,058.50
27. CASH ON HAND AT CLOSE	\$ 5,692.62	\$ 5,692.62

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

11 AUG 18 PM 1:09

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

SCHIFF FOR SENATE

ADDRESS (number and street)

PO BOX 1134



Check if different than previously reported. (ACC)

WESTON

CT

06883

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00468199

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

CT

00

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

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

in the State of

5. Covering Period

10

01

2010

through

12

31

2010

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 SCHIFF

Signature of Treasurer Electronically Filed by

Andrew Schiff

Date

08

12

2011

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)

FE5AN018

11020323967

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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Write or Type Committee Name

SCHIFF FOR SENATE

Report Covering the Period:

From:

M M
1 0

D D
0 1

Y Y Y Y
2 0 1 0

To:

M M
1 2

D D
3 1

Y Y Y Y
2 0 1 0

	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)).....	16812.65	2866897.19
(b) Total Contribution Refunds (from Line 20(d)).....	55529.00	185279.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-38716.35	2681618.19
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	11449.04	3531212.97
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4291.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11449.04	3526921.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5692.62	
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).....	837000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

FE5AN018

11020323968

POST-ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

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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

SCHIFF FOR SENATE

Report Covering the Period: From:

MM	DD	YYYY
10	01	2010

 To:

MM	DD	YYYY
12	31	2010

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <table border="1"><tr><td>MM</td><td>DD</td><td>YYYY</td></tr><tr><td>11</td><td>02</td><td>2010</td></tr></table> (date of general election)	MM	DD	YYYY	11	02	2010	COLUMN C Total for <table border="1"><tr><td>MM</td><td>DD</td><td>YYYY</td></tr><tr><td>11</td><td>03</td><td>2010</td></tr></table> (date after general election) through <table border="1"><tr><td>MM</td><td>DD</td><td>YYYY</td></tr><tr><td>12</td><td>31</td><td>2010</td></tr></table> (last day of reporting period)	MM	DD	YYYY	11	03	2010	MM	DD	YYYY	12	31	2010
MM	DD	YYYY																		
11	02	2010																		
MM	DD	YYYY																		
11	03	2010																		
MM	DD	YYYY																		
12	31	2010																		
11. CONTRIBUTIONS (other than loans) FROM:																				
(a) Individuals/Persons Other than Political Committees																				
(i) Itemized (Use Schedule A)																				
<table border="1"><tr><td>1550.00</td></tr></table>	1550.00	<table border="1"><tr><td>1707947.37</td></tr></table>	1707947.37	<table border="1"><tr><td>300.00</td></tr></table>	300.00															
1550.00																				
1707947.37																				
300.00																				
(ii) Unitemized																				
<table border="1"><tr><td>15262.65</td></tr></table>	15262.65	<table border="1"><tr><td>1155532.55</td></tr></table>	1155532.55	<table border="1"><tr><td>15262.65</td></tr></table>	15262.65															
15262.65																				
1155532.55																				
15262.65																				
(iii) Total of contributions from individuals																				
<table border="1"><tr><td>16812.65</td></tr></table>	16812.65	<table border="1"><tr><td>2863479.92</td></tr></table>	2863479.92	<table border="1"><tr><td>15562.65</td></tr></table>	15562.65															
16812.65																				
2863479.92																				
15562.65																				
(b) Political Party Committees																				
<table border="1"><tr><td>0.00</td></tr></table>	0.00	<table border="1"><tr><td>250.00</td></tr></table>	250.00	<table border="1"><tr><td>0.00</td></tr></table>	0.00															
0.00																				
250.00																				
0.00																				
(c) Other Political Committees																				
<table border="1"><tr><td>0.00</td></tr></table>	0.00	<table border="1"><tr><td>3167.27</td></tr></table>	3167.27	<table border="1"><tr><td>0.00</td></tr></table>	0.00															
0.00																				
3167.27																				
0.00																				

**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	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
16812.65	2866897.19	15562.65
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
12000.00	825000.00	12000.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
12000.00	825000.00	12000.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	4291.28	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
28812.65	3696188.47	27562.65

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

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Write or Type Committee Name

SCHIFF FOR SENATE

Report the covering period

From:

10

01

2010

To:

12

31

2010

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 * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
11449.04	3531212.97	1466.53
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
55529.00	185279.00	100.00
(b) Political Party Committees		
0.00	0.00	0.00

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POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

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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 * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
-------------------------------	---	--

(c) Other political committees (such as PACs)

0.00

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))

55529.00

185279.00

100.00

21. OTHER DISBURSEMENTS

0.00

0.00

0.00

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

66978.04

3716491.97

1566.53

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))

-38716.35

2681618.19

15462.65

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

11449.04

3526921.69

1466.53

V. CASH SUMMARY

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD	43858.01
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	28812.65
25. SUBTOTAL(add Line 23 and Line 24)	72670.66
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	66978.04
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	5692.62

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11020323972

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 7 / 39	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) LUCILE LEE Mailing Address 26 OAK STREET City TENAFLY State NJ Zip Code 07670 FEC ID number of contributing federal political committee. C Name of Employer NONE Occupation HOMEMAKER Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YY</td> </tr> <tr> <td>10</td> <td>15</td> <td>2010</td> </tr> </table> Transaction ID: SA11AI.4174 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> CONTRIBUTION	MM	DD	YY	10	15	2010	1000.00
MM	DD	YY							
10	15	2010							
1000.00									

B. Full Name (Last, First, Middle Initial) JAMES SANDERSON Mailing Address 8 FAIRVIEW LN City GORHAM State ME Zip Code 04038 FEC ID number of contributing federal political committee. C Name of Employer NONE Occupation RETIRED Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YY</td> </tr> <tr> <td>11</td> <td>29</td> <td>2010</td> </tr> </table> Transaction ID: SA11AI.4176 Amount of Each Receipt this Period <table border="1"> <tr> <td>300.00</td> </tr> </table> CONTRIBUTION	MM	DD	YY	11	29	2010	300.00
MM	DD	YY							
11	29	2010							
300.00									

C. Full Name (Last, First, Middle Initial) MICHAEL YOST Mailing Address 902 HALSEMA ROAD S City JACKSONVILLE State FL Zip Code 32221 FEC ID number of contributing federal political committee. C Name of Employer NONE Occupation RETIRED MECHANIC Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YY</td> </tr> <tr> <td>11</td> <td>01</td> <td>2010</td> </tr> </table> Transaction ID: SA11AI.4175 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> CONTRIBUTION	MM	DD	YY	11	01	2010	250.00
MM	DD	YY							
11	01	2010							
250.00									

SUBTOTAL of Receipts This Page (optional)	1550.00
TOTAL This Period (last page this line number only)	1550.00

11020323973

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 39

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A.

Full Name (Last, First, Middle Initial)

PETER DAVID SCHIFF

Mailing Address 2 WEST BRANCH ROAD

City

WESTON

State

CT

Zip Code

06883

FEC ID number of contributing
federal political committee.

C S0CT00169

Name of Employer

Occupation

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12000.00

Date of Receipt

MM / DD / YYYY
12 / 13 / 2010

Transaction ID: SA13A.4301

Amount of Each Receipt this Period

12000.00

PERSONAL LOAN

SUBTOTAL of Receipts This Page (optional)

12000.00

TOTAL This Period (last page this line number only)

12000.00

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)

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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

<p>A. Full Name (Last, First, Middle Initial) AFFORDABLE CONTRACTER STORAGE</p> <p>Mailing Address 167 CHERRY STREET #417</p> <p>City MILFORD State CT Zip Code 06460</p> <p>Purpose of Disbursement BUS TOUR - TRUCK SPACE</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4215 Date of Disbursement 10 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Category/Type 002</p>
<p>B. Full Name (Last, First, Middle Initial) ALL AMERICAN WASTE</p> <p>Mailing Address PO BOX 630</p> <p>City WINDSOR State CT Zip Code 06088</p> <p>Purpose of Disbursement TRASH PICK-UP</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4216 Date of Disbursement 10 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 42.40</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO BOX 8110</p> <p>City AURORA State IL Zip Code 60507</p> <p>Purpose of Disbursement TELEPHONE SERVICE</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4214 Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1054.13</p> <p>Category/Type 001</p>
<p>SUBTOTAL of Disbursements This Page (optional) 1346.53</p> <p>TOTAL This Period (last page this line number only)</p>	

**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)

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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A.	Full Name (Last, First, Middle Initial) BANK OF AMERICA			Transaction ID: SB17.4200 Date of Disbursement 10 / 29 / 2010	
	Mailing Address 117 OLD RIDGEFIELD RD			Amount of Each Disbursement this Period 17.00	
	City WILTON	State CT	Zip Code 06897		
	Purpose of Disbursement MAINTENANCE FEE		001 Category/ Type		
Candidate Name PETER DAVID SCHIFF					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CT District: 00					
B.	Full Name (Last, First, Middle Initial) BANK OF AMERICA			Transaction ID: SB17.4204 Date of Disbursement 11 / 19 / 2010	
	Mailing Address 117 OLD RIDGEFIELD RD			Amount of Each Disbursement this Period 175.00	
	City WILTON	State CT	Zip Code 06897		
	Purpose of Disbursement BANK CHARGES		001 Category/ Type		
Candidate Name PETER DAVID SCHIFF					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CT District: 00					
C.	Full Name (Last, First, Middle Initial) BANK OF AMERICA			Transaction ID: SB17.4202 Date of Disbursement 11 / 30 / 2010	
	Mailing Address 117 OLD RIDGEFIELD RD			Amount of Each Disbursement this Period 17.00	
	City WILTON	State CT	Zip Code 06897		
	Purpose of Disbursement MAINTENANCE FEE		001 Category/ Type		
Candidate Name PETER DAVID SCHIFF					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CT District: 00					
SUBTOTAL of Disbursements This Page (optional)				209.00	
TOTAL This Period (last page this line number only)					

11020323976

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)

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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) BANK OF AMERICA</p> <p>Mailing Address 117 OLD RIDGEFIELD RD</p> <p>City WILTON State CT Zip Code 06897</p> <p>Purpose of Disbursement MAINTENANCE FEE</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4203 Date of Disbursement 12 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 18.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CABLEVISION</p> <p>Mailing Address PO BOX 9256</p> <p>City CHELSEA State MA Zip Code 02150</p> <p>Purpose of Disbursement CABLE SERVICE</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4218 Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 67.56</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) DYNAMIC INTERACTIVE</p> <p>Mailing Address 16842 VON KARMAN SUITE 475</p> <p>City IRVINE State CA Zip Code 92606</p> <p>Purpose of Disbursement WEB HOSTING</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4219 Date of Disbursement 10 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 9.95</p>
<p>SUBTOTAL of Disbursements This Page (optional) 95.51</p> <p>TOTAL This Period (last page this line number only)</p>	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) DYNAMIC INTERACTIVE</p> <p>Mailing Address 16842 VON KARMAN SUITE 475</p> <p>City IRVINE State CA Zip Code 92606</p> <p>Purpose of Disbursement WEB HOSTING</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CT District: 00</p>	<p>Transaction ID: SB17.4220</p> <p>Date of Disbursement 11 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 9.95</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) DYNAMIC INTERACTIVE</p> <p>Mailing Address 16842 VON KARMAN SUITE 475</p> <p>City IRVINE State CA Zip Code 92606</p> <p>Purpose of Disbursement WEB HOSTING</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CT District: 00</p>	<p>Transaction ID: SB17.4221</p> <p>Date of Disbursement 12 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 9.95</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) EFAX</p> <p>Mailing Address 1378 WILLOW RD</p> <p>City MENLO PARK State CA Zip Code 94025</p> <p>Purpose of Disbursement FAX SERVICE</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CT District: 00</p>	<p>Transaction ID: SB17.4222</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 19.95</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 39.85</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) EFAX	Transaction ID: SB17.4223 Date of Disbursement
Mailing Address 1378 WILLOW RD	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>11182010</div>
City MENLO PARK State CA Zip Code 94025	Amount of Each Disbursement this Period
Purpose of Disbursement FAX SERVICE Candidate Name PETER DAVID SCHIFF	<div> <div>Category/Type</div> <div>001</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	<div> <div>Amount of Each Disbursement this Period</div> <div>19.95</div> </div>
B. Full Name (Last, First, Middle Initial) EFAX	Transaction ID: SB17.4224 Date of Disbursement
Mailing Address 1378 WILLOW RD	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>12202010</div>
City MENLO PARK State CA Zip Code 94025	Amount of Each Disbursement this Period
Purpose of Disbursement FAX SERVICE Candidate Name PETER DAVID SCHIFF	<div> <div>Category/Type</div> <div>001</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	<div> <div>Amount of Each Disbursement this Period</div> <div>19.95</div> </div>
C. Full Name (Last, First, Middle Initial) FIRST DATA SERVICES	Transaction ID: SB17.4205 Date of Disbursement
Mailing Address 12050 BALTIMORE AVE	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10042010</div>
City BELTSVILLE State MD Zip Code 20705	Amount of Each Disbursement this Period
Purpose of Disbursement FUNDRAISING EXPENSE Candidate Name PETER DAVID SCHIFF	<div> <div>Category/Type</div> <div>003</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	<div> <div>Amount of Each Disbursement this Period</div> <div>37.55</div> </div>
SUBTOTAL of Disbursements This Page (optional)	<div> <div>Amount of Each Disbursement this Period</div> <div>77.45</div> </div>
TOTAL This Period (last page this line number only)	<div> <div>Amount of Each Disbursement this Period</div> <div></div> </div>

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A.

Full Name (Last, First, Middle Initial)
FIRST DATA SERVICES

Mailing Address 12050 BALTIMORE AVE

City BELTSVILLE State MD Zip Code 20705

Purpose of Disbursement
FUNDRAISING EXPENSE

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
State: CT District: 00 ☐ Other (specify) ▼

Transaction ID: SB17.4206
Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

24.17

003
Category/
Type

B.

Full Name (Last, First, Middle Initial)
FIRST DATA SERVICES

Mailing Address 12050 BALTIMORE AVE

City BELTSVILLE State MD Zip Code 20705

Purpose of Disbursement
FUNDRAISING EXPENSE

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
State: CT District: 00 ☐ Other (specify) ▼

Transaction ID: SB17.4207
Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

8.55

003
Category/
Type

C.

Full Name (Last, First, Middle Initial)
FIRST DATA SERVICES

Mailing Address 12050 BALTIMORE AVE

City BELTSVILLE State MD Zip Code 20705

Purpose of Disbursement
FUNDRAISING EXPENSE

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
State: CT District: 00 ☐ Other (specify) ▼

Transaction ID: SB17.4208
Date of Disbursement

10 / 18 / 2010

Amount of Each Disbursement this Period

368.00

003
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

400.72

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

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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) FIRST DATA SERVICES</p> <p>Mailing Address 12050 BALTIMORE AVE</p> <p>City BELTSVILLE State MD Zip Code 20705</p> <p>Purpose of Disbursement FUNDRAISING EXPENSE</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CT District: 00</p>	<p>Transaction ID: SB17.4210</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 368.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) FIRST DATA SERVICES</p> <p>Mailing Address 12050 BALTIMORE AVE</p> <p>City BELTSVILLE State MD Zip Code 20705</p> <p>Purpose of Disbursement FUNDRAISING EXPENSE</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CT District: 00</p>	<p>Transaction ID: SB17.4209</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 3.17</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) FIRST DATA SERVICES</p> <p>Mailing Address 12050 BALTIMORE AVE</p> <p>City BELTSVILLE State MD Zip Code 20705</p> <p>Purpose of Disbursement FUNDRAISING EXPENSE</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CT District: 00</p>	<p>Transaction ID: SB17.4177</p> <p>Date of Disbursement 11 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 7.96</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 379.13</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A.

Full Name (Last, First, Middle Initial)
GULF MANAGEMENT

Mailing Address 2753 STATE ROUTE 580

City CLEARWATER State FL Zip Code 33761

Purpose of Disbursement
FUNDRAISING EXPENSE

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House
☒ Senate
☐ President

State: CT District: 00

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB17.4212
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

5.50

B.

Full Name (Last, First, Middle Initial)
INTERMEDIA

Mailing Address 156 WEST 56TH STREET
SUITE 1601

City NEW YORK State NY Zip Code 10019

Purpose of Disbursement
INTERNET SERVICES

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House
☒ Senate
☐ President

State: CT District: 00

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB17.4225
Date of Disbursement

11 / 08 / 2010

Amount of Each Disbursement this Period

102.85

C.

Full Name (Last, First, Middle Initial)
INTERMEDIA

Mailing Address 156 WEST 56TH STREET
SUITE 1601

City NEW YORK State NY Zip Code 10019

Purpose of Disbursement
INTERNET SERVICES

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House
☒ Senate
☐ President

State: CT District: 00

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB17.4226
Date of Disbursement

12 / 02 / 2010

Amount of Each Disbursement this Period

102.85

SUBTOTAL of Disbursements This Page (optional) ►

211.20

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

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE</p> <p>Mailing Address DEPT OF THE TREASURY 15TH STREET</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement FEDERAL UNEMPLOYMENT TAX (3RD QTR)</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4227 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 68.60</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) J A ROESCH & ASSOCIATES</p> <p>Mailing Address 246 FEDERAL ROAD D-24</p> <p>City BROOKFIELD State CT Zip Code 06804</p> <p>Purpose of Disbursement ACCOUNTING SERVICES</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4228 Date of Disbursement 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 763.00</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) LAST EXIT LLC</p> <p>Mailing Address 247 CENTRE STREET 7TH FLOOR</p> <p>City NEW YORK State NY Zip Code 10013</p> <p>Purpose of Disbursement WEB SERVICES</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4229 Date of Disbursement 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>001 Category/ Type</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 5631.60</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) PITNEY BOWES		Transaction ID: SB17.4230 Date of Disbursement 10 / 20 / 2010	
Mailing Address PO BOX 856042		Amount of Each Disbursement this Period 37.09	
City LOUISVILLE	State KY	Zip Code 40285	001 Category/ Type
Purpose of Disbursement POSTAGE MACHINE RENTAL			
Candidate Name PETER DAVID SCHIFF			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 00			

B. Full Name (Last, First, Middle Initial) PITNEY BOWES		Transaction ID: SB17.4231 Date of Disbursement 11 / 19 / 2010	
Mailing Address PO BOX 856042		Amount of Each Disbursement this Period 37.09	
City LOUISVILLE	State KY	Zip Code 40285	001 Category/ Type
Purpose of Disbursement POSTAGE MACHINE RENTAL			
Candidate Name PETER DAVID SCHIFF			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 00			

C. Full Name (Last, First, Middle Initial) PITNEY BOWES		Transaction ID: SB17.4232 Date of Disbursement 12 / 22 / 2010	
Mailing Address PO BOX 856042		Amount of Each Disbursement this Period 37.09	
City LOUISVILLE	State KY	Zip Code 40285	001 Category/ Type
Purpose of Disbursement POSTAGE MACHINE RENTAL			
Candidate Name PETER DAVID SCHIFF			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 00			

SUBTOTAL of Disbursements This Page (optional) ▶

111.27

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

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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) POLAND SPRINGS	Transaction ID: SB17.4233 Date of Disbursement
Mailing Address PO BOX 856192	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>10</div> <div>28</div> <div>2010</div> </div>
City LOUISVILLE State KY Zip Code 40285	Amount of Each Disbursement this Period
Purpose of Disbursement WATER Candidate Name PETER DAVID SCHIFF	<div> <div>Category/Type</div> <div>001</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	<div> <div>Amount of Each Disbursement this Period</div> <div>56.50</div> </div>
B. Full Name (Last, First, Middle Initial) PURCHASE POWER	Transaction ID: SB17.4235 Date of Disbursement
Mailing Address PO BOX 374184	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>10</div> <div>04</div> <div>2010</div> </div>
City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period
Purpose of Disbursement POSTAGE Candidate Name PETER DAVID SCHIFF	<div> <div>Category/Type</div> <div>001</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	<div> <div>Amount of Each Disbursement this Period</div> <div>702.98</div> </div>
C. Full Name (Last, First, Middle Initial) QGIVE INC	Transaction ID: SB17.4213 Date of Disbursement
Mailing Address 53 LAKE MORTON DR	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>10</div> <div>04</div> <div>2010</div> </div>
City LAKELAND State FL Zip Code 33801	Amount of Each Disbursement this Period
Purpose of Disbursement FUNDRAISING EXPENSE Candidate Name PETER DAVID SCHIFF	<div> <div>Category/Type</div> <div>003</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	<div> <div>Amount of Each Disbursement this Period</div> <div>93.00</div> </div>
SUBTOTAL of Disbursements This Page (optional)	<div> <div>852.48</div> </div>
TOTAL This Period (last page this line number only)	

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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) SOUTHERN CT GAS		Transaction ID: SB17.4237 Date of Disbursement 10 / 04 / 2010	
Mailing Address PO BOX 1999		Amount of Each Disbursement this Period 35.00	
City AUGUSTA	State ME	Zip Code 04332	001 Category/ Type
Purpose of Disbursement UTILITIES			
Candidate Name PETER DAVID SCHIFF			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 00			

B. Full Name (Last, First, Middle Initial) SOUTHERN CT GAS		Transaction ID: SB17.4236 Date of Disbursement 10 / 28 / 2010	
Mailing Address PO BOX 1999		Amount of Each Disbursement this Period 11.92	
City AUGUSTA	State ME	Zip Code 04332	001 Category/ Type
Purpose of Disbursement UTILITIES			
Candidate Name PETER DAVID SCHIFF			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 00			

C. Full Name (Last, First, Middle Initial) STAMPS.COM		Transaction ID: SB17.4238 Date of Disbursement 10 / 15 / 2010	
Mailing Address MAIN POST OFFICE		Amount of Each Disbursement this Period 15.99	
City WASHINGTON	State DC	Zip Code 20001	001 Category/ Type
Purpose of Disbursement POSTAGE			
Candidate Name PETER DAVID SCHIFF			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 00			

SUBTOTAL of Disbursements This Page (optional) ▶

62.91

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

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) STAMPS.COM		Transaction ID: SB17.4239 Date of Disbursement 11 / 15 / 2010	
Mailing Address MAIN POST OFFICE		Amount of Each Disbursement this Period 15.99	
City WASHINGTON	State DC	Zip Code 20001	Category/ Type 001
Purpose of Disbursement POSTAGE			
Candidate Name PETER DAVID SCHIFF			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 00			

B. Full Name (Last, First, Middle Initial) STAMPS.COM		Transaction ID: SB17.4240 Date of Disbursement 12 / 15 / 2010	
Mailing Address MAIN POST OFFICE		Amount of Each Disbursement this Period 15.99	
City WASHINGTON	State DC	Zip Code 20001	Category/ Type 001
Purpose of Disbursement POSTAGE			
Candidate Name PETER DAVID SCHIFF			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 00			

C. Full Name (Last, First, Middle Initial) STATE OF CT - DEPT OF LABOR		Transaction ID: SB17.4241 Date of Disbursement 10 / 15 / 2010	
Mailing Address PO BOX 2940		Amount of Each Disbursement this Period 639.45	
City HARTFORD	State CT	Zip Code 06104	Category/ Type 001
Purpose of Disbursement STATE UNEMPLOYMENT TAX (3RD QTR)			
Candidate Name PETER DAVID SCHIFF			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 00			

SUBTOTAL of Disbursements This Page (optional) ▶

671.43

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) UNITED ILLUMINATING	Transaction ID: SB17.4242 Date of Disbursement
Mailing Address PO BOX 9230	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10042010</div>
City CHelsea State MA Zip Code 02150	Amount of Each Disbursement this Period
Purpose of Disbursement UTILITIES Candidate Name PETER DAVID SCHIFF	<div>810.20</div> <div>001 Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
B. Full Name (Last, First, Middle Initial) ANDREW VAN SLYKE	Transaction ID: SB17.4217 Date of Disbursement
Mailing Address 94 WASHINGTON ST APT 24	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10112010</div>
City NORWALK State CT Zip Code 06584	Amount of Each Disbursement this Period
Purpose of Disbursement CONSULTING - SEPTEMBER FUNDRAISING Candidate Name PETER DAVID SCHIFF	<div>462.50</div> <div>001 Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
C. Full Name (Last, First, Middle Initial) VONAGE	Transaction ID: SB17.4243 Date of Disbursement
Mailing Address 23 COUNTY RD 520	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10012010</div>
City HOLMDEL State NJ Zip Code 07733	Amount of Each Disbursement this Period
Purpose of Disbursement TELEPHONE SERVICE Candidate Name PETER DAVID SCHIFF	<div>22.49</div> <div>001 Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
SUBTOTAL of Disbursements This Page (optional)	<div>1295.19</div>
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) VONAGE	Transaction ID: SB17.4244 Date of Disbursement
Mailing Address 23 COUNTY RD 520	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>11012010</div>
City HOLMDEL State NJ Zip Code 07733	Amount of Each Disbursement this Period
Purpose of Disbursement TELEPHONE SERVICE Candidate Name PETER DAVID SCHIFF	<div> <div>001</div> <div>Category/Type</div> </div> <div>21.59</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
B. Full Name (Last, First, Middle Initial) VONAGE	Transaction ID: SB17.4245 Date of Disbursement
Mailing Address 23 COUNTY RD 520	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>12022010</div>
City HOLMDEL State NJ Zip Code 07733	Amount of Each Disbursement this Period
Purpose of Disbursement TELEPHONE SERVICE Candidate Name PETER DAVID SCHIFF	<div> <div>001</div> <div>Category/Type</div> </div> <div>21.59</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
C. Full Name (Last, First, Middle Initial) VONAGE	Transaction ID: SB17.4246 Date of Disbursement
Mailing Address 23 COUNTY RD 520	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>12312010</div>
City HOLMDEL State NJ Zip Code 07733	Amount of Each Disbursement this Period
Purpose of Disbursement TELEPHONE SERVICE Candidate Name PETER DAVID SCHIFF	<div> <div>001</div> <div>Category/Type</div> </div> <div>21.59</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
SUBTOTAL of Disbursements This Page (optional)	<div>64.77</div>
TOTAL This Period (last page this line number only)	<div>11449.04</div>

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) ERIC CROWN	Transaction ID: SB20A.4280 Date of Disbursement <div> <div>10</div> <div>11</div> <div>2010</div> </div>
Mailing Address 5665 E VALLE VISTA RD	Amount of Each Disbursement this Period <div>2400.00</div>
City PHOENIX State AZ Zip Code 85018	<div>010</div> Category/ Type
Purpose of Disbursement CONTRIBUTION REFUND	
Candidate Name PETER DAVID SCHIFF	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
B. Full Name (Last, First, Middle Initial) ROBERT DICK	Transaction ID: SB20A.4295 Date of Disbursement <div> <div>10</div> <div>11</div> <div>2010</div> </div>
Mailing Address 2030 CHESTER BLVD #340	Amount of Each Disbursement this Period <div>200.00</div>
City RICHMOND State IN Zip Code 47374	<div>010</div> Category/ Type
Purpose of Disbursement CONTRIBUTION REFUND	
Candidate Name PETER DAVID SCHIFF	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
C. Full Name (Last, First, Middle Initial) GILBERT DOMINGUEZ	Transaction ID: SB20A.4282 Date of Disbursement <div> <div>10</div> <div>11</div> <div>2010</div> </div>
Mailing Address PO BOX 3006	Amount of Each Disbursement this Period <div>2400.00</div>
City SOUTH PASADENA State CA Zip Code 91031	<div>010</div> Category/ Type
Purpose of Disbursement CONTRIBUTION REFUND	
Candidate Name PETER DAVID SCHIFF	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
SUBTOTAL of Disbursements This Page (optional)	<div>5000.00</div>
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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) CURTIS ENSIGN	Transaction ID: SB20A.4278 Date of Disbursement
Mailing Address 450 NEWPORT CENTER DR SUITE 480	<div> <div>10</div> <div>11</div> <div>2010</div> </div>
City NEWPORT BEACH State CA Zip Code 92660	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION REFUND	<div>200.00</div>
Candidate Name PETER DAVID SCHIFF	<div>010</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) MICHAEL FLEISCHER	Transaction ID: SB20A.4288 Date of Disbursement
Mailing Address 26 OAK STREET	<div> <div>10</div> <div>11</div> <div>2010</div> </div>
City TENAFLY State NJ Zip Code 07670	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION REFUND	<div>1000.00</div>
Candidate Name PETER DAVID SCHIFF	<div>010</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) JERRELL HEIN	Transaction ID: SB20A.4284 Date of Disbursement
Mailing Address 301 WATER TOWER RD	<div> <div>10</div> <div>11</div> <div>2010</div> </div>
City SAN MARCOS State TX Zip Code 78666	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION REFUND	<div>2400.00</div>
Candidate Name PETER DAVID SCHIFF	<div>010</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)	<div>3600.00</div>
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) STEVE HOLDER</p> <p>Mailing Address 18 SCENIC BLUFF</p> <p>City NEWPORT COAST State CA Zip Code 92657</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB20A.4296</p> <p>Date of Disbursement 10 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) BESSIE KEENS</p> <p>Mailing Address 1221 SW 10TH AVE UNIT 708</p> <p>City PORTLAND State OR Zip Code 97205</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB20A.4275</p> <p>Date of Disbursement 10 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) EMIL LOTYANU</p> <p>Mailing Address 522 FOOTHILL RD</p> <p>City BEVERLY HILLS State CA Zip Code 90210</p> <p>Purpose of Disbursement CONTRIBUTION REFUND</p> <p>Candidate Name PETER DAVID SCHIFF</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB20A.4279</p> <p>Date of Disbursement 10 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>010 Category/ Type</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 5050.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) STEVEN MADONNA	Transaction ID: SB20A.4297 Date of Disbursement <div> <div>10</div> <div>11</div> <div>2010</div> </div>
Mailing Address 19517 HINSDALE AVE	
City TORRANCE State CA Zip Code 90503	Amount of Each Disbursement this Period <div>2179.00</div>
Purpose of Disbursement CONTRIBUTION REFUND Candidate Name PETER DAVID SCHIFF	<div>010</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
B. Full Name (Last, First, Middle Initial) RICHARD MASTROMATTEO	Transaction ID: SB20A.4293 Date of Disbursement <div> <div>10</div> <div>11</div> <div>2010</div> </div>
Mailing Address 6 NESTING WAY BOX 1078	
City EAST SANDWICH State MA Zip Code 02537	Amount of Each Disbursement this Period <div>14400.00</div>
Purpose of Disbursement CONTRIBUTION REFUND Candidate Name PETER DAVID SCHIFF	<div>010</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
C. Full Name (Last, First, Middle Initial) ALLEN MONS	Transaction ID: SB20A.4273 Date of Disbursement <div> <div>10</div> <div>11</div> <div>2010</div> </div>
Mailing Address 353 BIRCHWOOD DR	
City WAUKEGAN State IL Zip Code 60085	Amount of Each Disbursement this Period <div>2400.00</div>
Purpose of Disbursement CONTRIBUTION REFUND Candidate Name PETER DAVID SCHIFF	<div>010</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
SUBTOTAL of Disbursements This Page (optional)	<div>18979.00</div>
TOTAL This Period (last page this line number only)	

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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A.

Full Name (Last, First, Middle Initial)
MICHAEL NORINSBERG

Mailing Address 145A HUNTS POINT TERMINAL

City State Zip Code
BRONX NY 10474

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name
PETER DAVID SCHIFF

010
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
Other (specify) ▼
State: CT District: 00

Transaction ID: SB20A.4287
Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

2400.00

B.

Full Name (Last, First, Middle Initial)
JAMES PASSIN

Mailing Address 2112 BROADWAY #7B

City State Zip Code
NEW YORK NY 10023

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name
PETER DAVID SCHIFF

010
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
Other (specify) ▼
State: CT District: 00

Transaction ID: SB20A.4283
Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

2400.00

C.

Full Name (Last, First, Middle Initial)
SYDNEY PASSIN

Mailing Address 2112 BROADWAY #7B

City State Zip Code
NEW YORK NY 10023

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name
PETER DAVID SCHIFF

010
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
Other (specify) ▼
State: CT District: 00

Transaction ID: SB20A.4298
Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

2400.00

SUBTOTAL of Disbursements This Page (optional)

7200.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A.

Full Name (Last, First, Middle Initial)
BERNADETTE POTAPCHUK

Mailing Address 259 FRANKLIN BLVD

City State Zip Code
LONG BEACH NY 11561

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼
State: CT District: 00

Transaction ID: SB20A.4274
Date of Disbursement

MM / DD / YYYY
10 / 11 / 2010

Amount of Each Disbursement this Period

2400.00

B.

Full Name (Last, First, Middle Initial)
RICHARD POTAPCHUK

Mailing Address 259 FRANKLIN BLVD

City State Zip Code
LONG BEACH NY 11561

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼
State: CT District: 00

Transaction ID: SB20A.4294
Date of Disbursement

MM / DD / YYYY
10 / 11 / 2010

Amount of Each Disbursement this Period

2400.00

C.

Full Name (Last, First, Middle Initial)
CARL RICE

Mailing Address 1030 KINGS HWY

City State Zip Code
SHREVEPORT LA 71104

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼
State: CT District: 00

Transaction ID: SB20A.4277
Date of Disbursement

MM / DD / YYYY
10 / 11 / 2010

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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)

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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) EVA SALAS	Transaction ID: SB20A.4281 Date of Disbursement
Mailing Address 2016 STOCKBRIDGE AVE	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10 / 11 / 2010</div>
City REDWOOD CITY State CA Zip Code 94061	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION REFUND Candidate Name PETER DAVID SCHIFF	<div> <div>010</div> <div>Category/ Type</div> </div> <div>2100.00</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
B. Full Name (Last, First, Middle Initial) MICHAEL SCHULZE	Transaction ID: SB20A.4290 Date of Disbursement
Mailing Address 4 WEBSTER RD	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10 / 11 / 2010</div>
City ELLINGTON State CT Zip Code 06029	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION REFUND Candidate Name PETER DAVID SCHIFF	<div> <div>010</div> <div>Category/ Type</div> </div> <div>1100.00</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
C. Full Name (Last, First, Middle Initial) MARK SMEAD	Transaction ID: SB20A.4286 Date of Disbursement
Mailing Address 862 GRAY FOX CIRCLE	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10 / 11 / 2010</div>
City PLEASANTON State CA Zip Code 94566	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION REFUND Candidate Name PETER DAVID SCHIFF	<div> <div>010</div> <div>Category/ Type</div> </div> <div>2400.00</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00	
SUBTOTAL of Disbursements This Page (optional)	<div>5600.00</div>
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)

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

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NAME OF COMMITTEE (In Full)

SCHIFF FOR SENATE

A.

Full Name (Last, First, Middle Initial)
JOSEPH TOOKER

Mailing Address PO BOX 566

City SALIDA State CO Zip Code 81201

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House
☒ Senate
☐ President

State: CT District: 00

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB20A.4285

Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

200.00

B.

Full Name (Last, First, Middle Initial)
MICHAEL UHRIG

Mailing Address 222 ADAM SMITH ST

City SYKESVILLE State MD Zip Code 21784

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House
☒ Senate
☐ President

State: CT District: 00

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB20A.4291

Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

2400.00

C.

Full Name (Last, First, Middle Initial)
PATRICK WALKER

Mailing Address 5 WOODSTOCK CT

City LITTLE ROCK State AR Zip Code 72227

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name
PETER DAVID SCHIFF

Office Sought: ☐ House
☒ Senate
☐ President

State: CT District: 00

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB20A.4292

Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

2400.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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)

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

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NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

A. Full Name (Last, First, Middle Initial) WILL WOHLER		Transaction ID: SB20A.4299 Date of Disbursement 12 / 22 / 2010	
Mailing Address 4115 TRAIL LAKE DR		Amount of Each Disbursement this Period 100.00	
City FORT WORTH	State TX	Zip Code 76109	010 Category/ Type
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name PETER DAVID SCHIFF			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 00			

SUBTOTAL of Disbursements This Page (optional) ▶

100.00

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

55529.00

SCHEDULE C (FEC Form 3)

LOANS

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

Transaction ID: SC/10.4104

LOAN SOURCE Full Name (Last, First, Middle Initial)
PETER DAVID SCHIFF - [PERSONAL FUNDS]

Election:

☐ Primary
☐ General
☒ Other (specify) ▼
Convention

Mailing Address 2 WEST BRANCH ROAD

City WESTON State CT ZIP Code 06883

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200000.00

0.00

200000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM
03

DD
31

YYYYYY
2010

UPON DEMAND

0.0000 % (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)

200000.00

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.

SCHEDULE C (FEC Form 3)

LOANS

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

Transaction ID: SC/10.4105

LOAN SOURCE Full Name (Last, First, Middle Initial)
PETER DAVID SCHIFF - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 2 WEST BRANCH ROAD

City WESTON State CT ZIP Code 06883

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YY 03 31 2010	UPON DEMAND	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional) ▶

50000.00

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.

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 35 / 39

FOR LINE NUMBER:
(check only one) ☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

Transaction ID: SC/10.4107

LOAN SOURCE Full Name (Last, First, Middle Initial)
PETER DAVID SCHIFF - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 2 WEST BRANCH ROAD

City WESTON State CT ZIP Code 06883

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YYYY 03 31 2010	UPON DEMAND	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional) ▶

250000.00

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.

SCHEDULE C (FEC Form 3)

LOANS

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

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FOR LINE NUMBER:
(check only one) ☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

Transaction ID: SC/10.4106

LOAN SOURCE Full Name (Last, First, Middle Initial)
PETER DAVID SCHIFF - [PERSONAL FUNDS]

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

Convention

Mailing Address 2 WEST BRANCH ROAD

City WESTON State CT ZIP Code 06883

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

M M
06

D D
05

Y Y Y Y
2010

Date Due

UPON DEMAND

Interest Rate

0.0000

% (apr)

Secured:

☐ Yes

☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

50000.00

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.

SCHEDULE C (FEC Form 3)

LOANS

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

Transaction ID: SC/10.4115

LOAN SOURCE Full Name (Last, First, Middle Initial)
PETER DAVID SCHIFF - [PERSONAL FUNDS]

Election:

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address 2 WEST BRANCH ROAD

City WESTON

State CT

ZIP Code 06883

Original Amount of Loan

75000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

75000.00

TERMS

Date Incurred

M M
0 7

D D
0 1

Y Y Y Y
2 0 1 0

Date Due

UPON DEMAND

Interest Rate

0.0000

% (apr)

Secured:

☐ Yes

☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)

75000.00

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.

SCHEDULE C (FEC Form 3)

LOANS

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

Transaction ID: SC/10.4121

LOAN SOURCE Full Name (Last, First, Middle Initial)
PETER DAVID SCHIFF - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 2 WEST BRANCH ROAD

City WESTON State CT ZIP Code 06883

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200000.00

0.00

200000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM
08

DD
02

YYYYYY
2010

UPON DEMAND

0.0000 % (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

200000.00

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.

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
SCHIFF FOR SENATE

Transaction ID: SC/10.4301

LOAN SOURCE Full Name (Last, First, Middle Initial)
PETER DAVID SCHIFF - [PERSONAL FUNDS]

Election:

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address 2 WEST BRANCH ROAD

City WESTON

State CT

ZIP Code 06883

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

12000.00

0.00

12000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
12

D D
13

Y Y Y Y
2 0 1 0

UPON DEMAND

0.0000

% (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

12000.00

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

837000.00

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

11020324006



386 Park Avenue Suite 1604
New York, NY 10016
www.europpac.net

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Office of Public Records
Hart Senate Office Building, Room 232
Washington, DC 20510

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AUG 17 2011

United States Senate

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OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL 08/12/11 _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER AM DATE PREPARED 08/18/11

11020324007

11020324008

