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Image# 12972543014

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	or An Authorize	d Committee			Office Use Only
NAME OF COMMITTEE (in full) TYPE	OR PRINT ▼	Example: If typir over the lines.	g, type	12FE4M5	
Susan Shelley for Congress					1
ADDRESS (number and street)	Box 6823				
Check if different					
than previously woo reported. (ACC)	odland Hills			CA 9	01365
2. FEC IDENTIFICATION NUMBER	R▼	EITY A		STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00515130	3. IS	THIS X NEW (N)	OR	AMENDI (A)	
4. TYPE OF REPORT (Choose O	ne) (b) 10.5	Day BDE Clastica Day			
(a) Quarterly Reports:	(b) 12-[Day PRE -Election Repo	ort for the:	-	
April 15 Quarterly Report (Ω1)	Primary (12P)	General (12	2G) Runoff (12R)
		Convention (12C)	Special (12	2S)
July 15 Quarterly Report (Q2)	W	D D /	V V V V	
X October 15 Quarterly Repo	ort (Q3) Ele	ction on	7		in the State of
January 31 Year-End Repo	rt (YE) (c) 30-[Day POST -Election Re	oort for the:		
		General (300	i)	Runoff (30l	R) Special (30S)
Termination Report (TER)	Ele	ction on	D D /	Y	in the State of
5. Covering Period 07 /	01 / Y Y 2012	Y Y through	M M M	/ 30 /	2012
I certify that I have examined this Repo	ort and to the best	of my knowledge and	belief it is ti	rue, correct and	complete.
Type or Print Name of Treasurer Sus	an Shelley				
Signature of Treasurer Susan Shelle	v	[Electronically	Filed] [Date 10	/ D D / Y Y Y Y 1 Y 2012
NOTE: Submission of false, erroneous, or	incomplete informat	ion may subject the per	son signing	this Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Susan Shelley for Congress

Report Covering the Period: From	n: 07	01	7 Y Y Y Y 2012	To:	09 09	30	/ Y Y Y Y Y 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))	125.00	5840.39
	(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	125.00	5840.39
	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	140.61	8463.49
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	140.61	8463.49
	Cash on Hand at Close of Reporting Period (from Line 27)	966.45	
	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
).	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	3589.53	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

PAGE 3 / 40

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Susan Shelley for Congress

Report Covering the Period: From: 07 01 2012 To: 09 30 2012

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
1. CONTRIBUTI	ONS (other than loans) FROM:			
Political	als/Persons Other Than Committees ized (use Schedule A)	0.00	2426.32	
, ,	emized	125.00	3348.71	
	individuals	125.00	5775.03	
	Party Committees	0.00	0.00	
` '	: PACs)	0.00	0.00	
(e) TOTAL (ndidateCONTRIBUTIONS nan loans)	0.00	65.36	
	es 11(a)(iii), (b), (c), and (d))	125.00	5840.39	
2. TRANSFERS AUTHORIZEI	FROM OTHER D COMMITTEES	0.00	0.00	
3. LOANS: (a) Made or	Guaranteed by the			
	te	0.00	3589.53	
` '	r Loans	0.00	0.00	
(c) TOTAL L (add Lin	es 13(a) and (b))	0.00	3589.53	
4. OFFSETS TO EXPENDITUR				
(Refunds, Re	bates, etc.)	0.00	0.00	
5. OTHER REC (Dividends, In	EIPTS nterest, etc.)	0.00	0.02	
11(e), 12, 13	EIPTS (add Lines (c), 14, and 15) o Line 24, page 4)	125.00	9429.94	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	140.61	8463.49
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
1.	OTHER DISBURSEMENTS	0.00	0.00
.2.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	140.61	8463.49
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	982.06
4	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	125.00
5.	SUBTOTAL (add Line 23 and Line 24)		1107.06
6.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	140.61
_	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	966.45

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Candidate Name

Office Sought:

State:

Purpose of Disbursement

C.

В.

House Senate

District:

President

Disbursement For:

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

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

Primary

Other (specify)

Image# 12972543018				
SCHEDULE B (FEC Forn	· ·	Use separate scl for each category Detailed Summan	nedule(s) y of the	FOR LINE NUMBER: PAGE 5 OF 40 (check only one) X 17
	using the name and a			person for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. US Postal Service Mailing Address Clarendon St.				Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Woodland Hills Purpose of Disbursement Post Office box renewal	State CA	Zip Code 91365		Amount of Each Disbursement this Period 38.00 Transaction ID : SB17.4459
Candidate Name Susan Shelley for Congr Office Sought: House Senate President State: CA District: 30	Disbursement For Primary Other (s	General	Category/ Type	
Full Name (Last, First, Middle Initial) B. Mailing Address				Date of Disbursement
City Purpose of Disbursement	State	Zip Code		Amount of Each Disbursement this Period
Office Sought: House Senate President State: District:	Disbursement For Primary Other (s	General	Category/ Type	
Full Name (Last, First, Middle Initial) C. Mailing Address				Date of Disbursement
City	State Zip	p Code		Amount of Each Disbursement this Period

Category/ Type

General

FE5AN018

38.00

38.00

Amount of Each Disbursement this Period

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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	13b

OF

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Detailed Summary Page Transaction ID: SC/10.4233 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 8.57 0.00 8.57 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M08^M 09 2011 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 8.57 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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JANS		Detailed Summary Pag	ge (Crieck Only One) 13b
AME OF COMMITTEE (In Full) Susan Shelley for Congress		Transac	tion ID : SC/10.4231
LOAN SOURCE Full Name (Last, Susan Shelley	First, Middle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address P.O. Box 6823			Other (specify)
City Woodland Hills		² Code 365	
			O talending of Olean of This Bridge
Original Amount of Loan	Cumulative Paymer	0.00	unce Outstanding at Close of This Period
TERMS Date Incurred M 08 / D 19 / Y 2011	Date	Due Interest Rate	% (apr)
List All Endorsers or Guarantors	(if any) to Loan Source		Yes No.
1. Full Name (Last, First, Middle I	nitial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9 9
3. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (optional)	<u> </u>	13.66
Carry outstanding balance only to LL			vard to appropriate line of Summary.
Sarry Sucstanding Dalance Unity to Li	THE O, OCHECULE D, IOF THIS IINC	on the Schedule D, Carry forv	vara to appropriate line of Sulfilliary.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4232 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 27.29 0.00 27.29 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M 08 2011 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 27.29 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4216 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 37.00 0.00 37.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D14 2011 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 37.00 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4201 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10.00 0.00 10.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 ^M 10^M 2011 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10.00 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4234 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4.75 0.00 4.75 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 10^M ^D14 2011 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4.75 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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DANS		Detailed Summary Pag	ge (Crieck Only One) 13b
AME OF COMMITTEE (In Full) Susan Shelley for Congress		Transac	etion ID : SC/10.4202
LOAN SOURCE Full Name (Last, F Susan Shelley	irst, Middle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address P.O. Box 6823			Other (specify)
City	State ZIP C	Code	
Woodland Hills	CA 9136	5	
Original Amount of Loan	Cumulative Payment 7	To Date Bala	ance Outstanding at Close of This Period
TERMS Date Incurred M 11 M / D 05 D / Y 2011	Date Du	e Interest Rate 0.00	
List All Endorsers or Guarantors (i			
1. Full Name (Last, First, Middle In	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (or			10.00
Carry outstanding balance only to LIN			vard to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) Detailed Summary Page Transaction ID: SC/10.4203 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10.00 0.00 10.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 ^M 12^M 2011 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10.00 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4204 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10.00 0.00 10.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M 05 Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10.00 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4210 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 51.28 0.00 51.28 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M ^D12 Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 51.28 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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DANS		Detailed Summary Page	e (crieck only one)
AME OF COMMITTEE (In Full) Susan Shelley for Congress		Transact	ion ID : SC/10.4239
LOAN SOURCE Full Name (Last, First, Midd Susan Shelley	dle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address P.O. Box 6823			Other (specify)
	State ZIP Cod	e	
Woodland Hills	CA 91365		
Original Amount of Loan 4.00	Cumulative Payment To I	Date Balar 0.00	nce Outstanding at Close of This Period 4.00
Date Incurred M 01 M / D 29 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Date Due	Interest Rate 0.00	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if any) to	Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	7IP Code	Amount Guaranteed Outstanding:	9
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	7IP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This Page (optional)		<u> </u>	4.00
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Detailed Summary Page Transaction ID: SC/10.4235 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4.75 0.00 4.75 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M ^D30 Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4.75 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4236 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4.75 0.00 4.75 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M ^D30 Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4.75 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4205 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10.00 0.00 10.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 ^M 02^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10.00 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4214 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4.90 0.00 4.90 **TERMS** Date Incurred Date Due Interest Rate Secured: 07 ^M 02^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4.90 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.

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Detailed Summary Page Transaction ID: SC/10.4211 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 42.50 0.00 42.50 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M 09 Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 42.50 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.

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(check only one) Detailed Summary Page Transaction ID: SC/10.4186 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 1740.00 0.00 1740.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 13^D ^M 02^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 1740.00 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.

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DANS			Detailed Summary Pa	
AME OF COMMITTEE (In Full) Susan Shelley for Congre	nee.		Transa	action ID : SC/10.4207
LOAN SOURCE Full Name (L		dle Initial)	[PERSONAL FUNDS]	Election: 2012
Susan Shelley				Primary General
Mailing Address P.O. Box 6823				Other (specify) ▼
City			P Code	
Woodland Hills		CA 9°	1365	
Original Amount of Loan		Cumulative Payme		lance Outstanding at Close of This Period
	382.81	9	0.00	382.81
TERMS Date Incurred		Date	Due Interest Ra	te Secured:
M 02 M / D 13 D / Y 20	01Ž Ý	M M / D D /	12/31/12 ° 0.0	% (apr) Yes No
List All Endorsers or Guarant	ors (if any) to	Loan Source		Tes No
1. Full Name (Last, First, Midd	dle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Midd	le Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Midd	le Initial)		Name of Employer	
Mailing Address			Occupation	
Cit.	04-4-	710 0-1-	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 1 9 1 9 1
4. Full Name (Last, First, Midd	le Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9
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Carry outstanding balance only to	o LINE 3, Sch	edule D, for this lin	e. If no Schedule D, carry for	ward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4212 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 38.02 0.00 38.02 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M ^D16 Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 38.02 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.

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Detailed Summary Page Transaction ID: SC/10.4215 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4.90 0.00 4.90 **TERMS** Date Incurred Date Due Interest Rate Secured: 23 ^M 02^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4.90 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.

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Detailed Summary Page Transaction ID: SC/10.4213 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 13.72 0.00 13.72 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 27 ^D ^M 02^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 13.72 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.

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Detailed Summary Page Transaction ID: SC/10.4206 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10.00 0.00 10.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 ^M 03^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10.00 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.

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Detailed Summary Page Transaction ID: SC/10.4237 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 15.00 0.00 15.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D26 ^M 03^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 15.00 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.

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Detailed Summary Page Transaction ID: SC/10.4295 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 41.25 0.00 41.25 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D26 ^M 03^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 41.25 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.

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(check only one) Detailed Summary Page Transaction ID: SC/10.4238 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 7.50 0.00 7.50 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D27^D ^M 03^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 7.50 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.

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(check only one) Detailed Summary Page Transaction ID: SC/10.4386 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Susan Shelley General Mailing Address Other (specify) P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 15.62 0.00 15.62 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D27^D ^M 04^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 15.62 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.

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OANS		Detailed Summary Pa	
AME OF COMMITTEE (In Full)		Transa	ction ID : SC/10.4387
Susan Shelley for Congress			
LOAN SOURCE Full Name (Last, I Susan Shelley	First, Middle Initial)		Election: 2012 Primary General
Mailing Address P.O. Box 6823			Other (specify)
City	State	ZIP Code	
Woodland Hills	CA	91365	
Original Amount of Loan	Cumulative Pay	ment To Date Bal	ance Outstanding at Close of This Period
10	.85	0.00	10.85
Date Incurred Mo4 / D27 / Y 2012		ate Due Interest Rat	0 % (apr)
List All Endorsers or Guarantors (if any) to Loan Source		Yes No
1. Full Name (Last, First, Middle Ir	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9 9
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 1
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AME OF COMMITTEE (In Full) Susan Shelley for Congres	S		Tra	nsaction	ID : SC/10.4382	!	
LOAN SOURCE Full Name (Last Susan Shelley	, First, Middle Initial)			ction: 2012 Primary General		
Mailing Address P.O. Box 6823					Other (specify) 🔻	
City Woodland Hills	State CA	ZIP Code 91365	,				
Original Amount of Loan		tive Payment To D		Balance	Outstanding at		
TERMS	12.00	7	0.00		9 3	12.	.00
Date Incurred M 05 M / D 06 D / Y 2012	M M /	Date Due	Interest	0.00	% (apr)	Secured: Yes	No
List All Endorsers or Guarantors							
1. Full Name (Last, First, Middle	Initial)		Name of Employer				
Mailing Address		(Occupation				
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	- 7]
2. Full Name (Last, First, Middle I	nitial)		Name of Employer				
Mailing Address		(Occupation				
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	- 7	7]
3. Full Name (Last, First, Middle	nitial)		Name of Employer				
Mailing Address			Occupation				
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	- 7]
4. Full Name (Last, First, Middle I	nitial)		Name of Employer				
Mailing Address			Occupation				
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	7	7]
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(check only one) Detailed Summary Page Transaction ID: SC/10.4383 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Susan Shelley General Mailing Address Other (specify) P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 6.99 0.00 6.99 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 05^M 06 Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 6.99 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.

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(check only one) Detailed Summary Page Transaction ID: SC/10.4388 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Susan Shelley General Mailing Address Other (specify) P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10.86 0.00 10.86 **TERMS** Date Incurred Date Due Interest Rate Secured: 07 ^M 05^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10.86 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.

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(check only one) Detailed Summary Page Transaction ID: SC/10.4384 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Susan Shelley General Mailing Address Other (specify) P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 35.00 0.00 35.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 05^M 08 Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 35.00 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.

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AME OF COMMITTEE (In Full) Susan Shelley for Congress		Transactio	on ID : SC/10.4385
LOAN SOURCE Full Name (Last, First, Midd Susan Shelley	le Initial)		Election: 2012 Primary General
Mailing Address P.O. Box 6823			Other (specify) ▼
	state ZIP Code	÷	
Woodland Hills	CA 91365		
Original Amount of Loan 4.90	Cumulative Payment To D	ate Balanc	e Outstanding at Close of This Period 4.90
Date Incurred M 05 M / D 12 D / Y Z 01Z Y M	Date Due	Interest Rate 0.00	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if any) to			
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address	(Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	,
2. Full Name (Last, First, Middle Initial)	1	Name of Employer	
Mailing Address	(Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9
3. Full Name (Last, First, Middle Initial)	1	Name of Employer	
Mailing Address	(Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	1	Name of Employer	
Mailing Address	(Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)		······································	4.90
TOTALS This Period (last page in this line only). Carry outstanding balance only to LINE 3, Scheen			rd to appropriate line of Summarv.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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OF

DANS			Detailed Summary Page	
AME OF COMMITTEE (In Full) Susan Shelley for Congre	cc		Transac	ction ID : SC/10.4445
LOAN SOURCE Full Name (La		dle Initial)	[PERSONAL FUNDS]	Election: 2012
Susan Shelley				Primary General
Mailing Address P.O. Box 6823				Other (specify)
City			Code	
Woodland Hills		CA 91	365	
Original Amount of Loan	20.59	Cumulative Paymer	t To Date Bala	ance Outstanding at Close of This Period 20.59
TERMS Date Incurred		Date	Due Interest Rat	e Secured:
M ₀₅ M / D ₂₁ D / Y Ž00	12 Y	/ M / D D /	12/31/12 0.00	
List All Endorsers or Guaranto	rs (if any) to	Loan Source		100 110
1. Full Name (Last, First, Middl	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	g g
2. Full Name (Last, First, Middle	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	, ,
3. Full Name (Last, First, Middle	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
J.,	<u> </u>		Outstanding:	7
UBTOTALS This Period This Pag	e (optional)		····	20.59
OTALS This Period (last page in	this line only		······	, ,
Carry outstanding balance only to	LINE 3, Sch	edule D, for this line	e. If no Schedule D, carry for	ward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4444 NAME OF COMMITTEE (In Full) Susan Shelley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Susan Shelley General Mailing Address Other (specify) \blacktriangledown P.O. Box 6823 City State ZIP Code CA 91365 Woodland Hills Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 30.00 0.00 30.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 ^M06^M Ž012 12/31/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 30.00 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.

Use separate schedule(s)

FOR LINE NUMBER:

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DANS			for each category of Detailed Summary Pa	
AME OF COMMITTEE (In Full) Susan Shelley for Congres	S		Transa	action ID : SC/10.4442
LOAN SOURCE Full Name (Last		e Initial)		Election: 2012
Susan Shelley	,	,		Primary General
Mailing Address P.O. Box 6823				Other (specify) ▼
City	S	tate ZIP Cod	de	
Woodland Hills		CA 91365		
Original Amount of Loan		Cumulative Payment To	Date Ba	llance Outstanding at Close of This Period
9:	36.07	9 9	0.00	936.07
Date Incurred M 06 / D07 / Y 2012	M M	Date Due	Interest Ra 2/31/12	00 % (apr)
List All Endorsers or Guarantors	s (if any) to I	_oan Source		Yes No.
1. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First, Middle I	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7
3. Full Name (Last, First, Middle I	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle I	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 0
SUBTOTALS This Period This Page	(optional)			936.07
TOTALS This Period (last page in th	is line only)			3589.53
				rward to appropriate line of Summary.