

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Fred Simon For Congress

Report Covering the Period: From: / / To: / /

	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))....	14510.00	14510.00
(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)).....	14510.00	14510.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	54827.56	71454.89
(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)).....	54827.56	71454.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	343231.70	
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).....	400000.00	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Fred Simon For Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11950.00	11950.00
(ii) Unitemized.....	2560.00	2560.00
(iii) TOTAL of contributions from individuals ▶	14510.00	14510.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	14510.00	14510.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	400000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	400000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	88.33	176.59
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	14598.33	414686.59

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	54827.56	71454.89
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
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	54827.56	71454.89

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	383460.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14598.33
25. SUBTOTAL (add Line 23 and Line 24).....	398059.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	54827.56
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	343231.70

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

A. Full Name (Last, First, Middle Initial)
Margaret M. Brannigan MD

Mailing Address 4176 Caminito Terviso

City San Diego State CA Zip Code 92122

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

Name of Employer ASMG Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 16 / 2013

Transaction ID : SA11AI.4187

Amount of Each Receipt this Period
 Contribution 500.00

B. Full Name (Last, First, Middle Initial)
Christopher Burns

Mailing Address 13171 Deron Avenue

City San Diego State CA Zip Code 92129

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

Name of Employer PDS Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 06 / 2013

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period
 Contribution 1000.00

C. Full Name (Last, First, Middle Initial)
Imad S. Dandan

Mailing Address 12828 Harwick Lane

City San Diego State CA Zip Code 92130

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

Name of Employer Self Employed Occupation Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 08 / 2013

Transaction ID : SA11AI.4191

Amount of Each Receipt this Period
 Contribution 2600.00

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

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

4100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

A. Full Name (Last, First, Middle Initial)
Alan Fink

Mailing Address 860 Country Club Lane

City State Zip Code
Coronado CA 92118

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

Name of Employer Occupation
Tactical Air Operations Inc. Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2013

Transaction ID : SA11AI.4205

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Dan Giurgiu

Mailing Address 5460 Thoroughbred

City State Zip Code
San Diego CA 92130

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2013

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
James Grisolia

Mailing Address 4033 3rd Ave #410

City State Zip Code
San Diego CA 92103

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : SA11AI.4127

Amount of Each Receipt this Period
2600.00

Contribution

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

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

4600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

A. Full Name (Last, First, Middle Initial)
Ledyard B. Hakes

Mailing Address 651 Balboa Avenue

City State Zip Code
Coronado CA 92118

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 18 / 2013

Transaction ID : SA11AI.4169

Amount of Each Receipt this Period
500.00
Contribution

B. Full Name (Last, First, Middle Initial)
Jerome C. Hall

Mailing Address 9920 Rue Chantemar

City State Zip Code
San Diego CA 92131

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 05 / 2013

Transaction ID : SA11AI.4197

Amount of Each Receipt this Period
1000.00
Contribution

C. Full Name (Last, First, Middle Initial)
Matthew V. Herron

Mailing Address 1718 Visalia Row

City State Zip Code
Coronado CA 92118

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 18 / 2013

Transaction ID : SA11AI.4175

Amount of Each Receipt this Period
250.00
Contribution

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

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

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

A. Full Name (Last, First, Middle Initial)
Brian McGuire

Mailing Address 515 N Highway 101

City Solana Beach State CA Zip Code 92075-1132

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

Name of Employer Self Employed Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2013

Transaction ID : SA11AI.4166

Amount of Each Receipt this Period
 Contribution 500.00

B. Full Name (Last, First, Middle Initial)
Eileen Natuzzi

Mailing Address 320 Santa Fe Drive

City Encinitas State CA Zip Code 92024

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

Name of Employer Self Employed Occupation Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2013

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period
 Contribution 1000.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period
 Contribution

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

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

1500.00

11950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

Full Name (Last, First, Middle Initial) A. B2B Website Design (Jan Sarvas)		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 8524 N 50th Place		Amount of Each Disbursement this Period 3431.25
City Paradise Valley State AZ Zip Code 85253	Purpose of Disbursement Online Consulting Category/Type	
Candidate Name		Transaction ID : SB17.4223
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. B2B Website Design (Jan Sarvas)		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 8524 N 50th Place		Amount of Each Disbursement this Period 3768.75
City Paradise Valley State AZ Zip Code 85253	Purpose of Disbursement Website Design Category/Type	
Candidate Name		Transaction ID : SB17.4251
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. B2B Website Design (Jan Sarvas)		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 8524 N 50th Place		Amount of Each Disbursement this Period 2434.15
City Paradise Valley State AZ Zip Code 85253	Purpose of Disbursement Online Advertising/Consulting Category/Type	
Candidate Name		Transaction ID : SB17.4230
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9634.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

Full Name (Last, First, Middle Initial) A. B2B Website Design (Jan Sarvas)		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 8524 N 50th Place		Amount of Each Disbursement this Period 5548.53
City Paradise Valley	State AZ Zip Code 85253	
Purpose of Disbursement Online Advertising/Consulting	Category/Type	Transaction ID : SB17.4241
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Joe Johnson		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 8625 E Belleview Pl, Unit 1089		Amount of Each Disbursement this Period 1166.68
City Scottsdale	State AZ Zip Code 85257	
Purpose of Disbursement Website Design	Category/Type	Transaction ID : SB17.4219
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Joe Johnson		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 8625 E Belleview Pl, Unit 1089		Amount of Each Disbursement this Period 1550.00
City Scottsdale	State AZ Zip Code 85257	
Purpose of Disbursement Graphic Design	Category/Type	Transaction ID : SB17.4242
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8265.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

Full Name (Last, First, Middle Initial) A. Koch & Hoos LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 901 N Washington St, Suite 700		Amount of Each Disbursement this Period 1005.00 Transaction ID : SB17.4243
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Accounting/Compliance Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Maelstrom Solutions		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 200 S Executive Dr, Suite 101		Amount of Each Disbursement this Period 144.95 Transaction ID : SB17.4227
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Credit Card Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Maelstrom Solutions		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 200 S Executive Dr, Suite 101		Amount of Each Disbursement this Period 2.90 Transaction ID : SB17.4228
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Credit Card Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1152.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

Full Name (Last, First, Middle Initial) A. Maelstrom Solutions		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 200 S Executive Dr, Suite 101		Amount of Each Disbursement this Period 28.20
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Credit Card Processing	Transaction ID : SB17.4229
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Maelstrom Solutions		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 200 S Executive Dr, Suite 101		Amount of Each Disbursement this Period 29.45
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Credit Card Processing	Transaction ID : SB17.4232
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Maelstrom Solutions		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 200 S Executive Dr, Suite 101		Amount of Each Disbursement this Period 68.80
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Credit Card Processing	Transaction ID : SB17.4233
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	126.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

Full Name (Last, First, Middle Initial) A. Maelstrom Solutions		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 200 S Executive Dr, Suite 101		Amount of Each Disbursement this Period 8.00
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Credit Card Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. Maelstrom Solutions		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 200 S Executive Dr, Suite 101		Amount of Each Disbursement this Period 117.60
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Credit Card Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) c. Maelstrom Solutions		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 200 S Executive Dr, Suite 101		Amount of Each Disbursement this Period 2.98
City Brookfield	State WI	
Zip Code 53005	Purpose of Disbursement Credit Card Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	128.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

Full Name (Last, First, Middle Initial) A. Bob Schuman		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2013
Mailing Address 7660 Fay Ave		Amount of Each Disbursement this Period 4000.00
City La Jolla	State CA	
Zip Code 92037	Purpose of Disbursement Research Consulting	Transaction ID : SB17.4245
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SD Police Foundation		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 444 West Beech Street, Suite 250		Amount of Each Disbursement this Period 1500.00
City San Diego	State CA	
Zip Code 92101	Purpose of Disbursement Event Expense: Tickets	Transaction ID : SB17.4221
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Stephen Shadegg		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 2861 Epaulette St		Amount of Each Disbursement this Period 10000.00
City San Diego	State CA	
Zip Code 92123	Purpose of Disbursement Campaign Management Services	Transaction ID : SB17.4218
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

Full Name (Last, First, Middle Initial) A. Stephen Shadegg		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 2861 Epaulette St		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.4239
City San Diego	State CA Zip Code 92123	
Purpose of Disbursement Campaign Management Services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Thompson Smith		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address 12978 Caminito Bodega		Amount of Each Disbursement this Period 1012.50 Transaction ID : SB17.4250
City Del Mar	State CA Zip Code 92014	
Purpose of Disbursement Photography	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. SoCal Graphics		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 8316 Clairemont Mesa Blvd, #105		Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.4212
City San Diego	State CA Zip Code 92111	
Purpose of Disbursement Printing: Business Cards/Banner	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11462.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

Full Name (Last, First, Middle Initial) A. SoCal Graphics		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 8316 Clairemont Mesa Blvd, #105		Amount of Each Disbursement this Period 409.32
City San Diego State CA Zip Code 92111	Category/Type	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : SB17.4214
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Robyn Wapner		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 1800 North New Hampshire Apt 218		Amount of Each Disbursement this Period 2000.00
City Los Angeles State CA Zip Code 90027	Category/Type	
Purpose of Disbursement Research Consulting	Candidate Name	Transaction ID : SB17.4220
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Robyn Wapner		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 1800 North New Hampshire Apt 218		Amount of Each Disbursement this Period 2000.00
City Los Angeles State CA Zip Code 90027	Category/Type	
Purpose of Disbursement Research Consulting	Candidate Name	Transaction ID : SB17.4231
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4409.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Fred Simon For Congress

Full Name (Last, First, Middle Initial) A. Robyn Wapner		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 1800 North New Hampshire Apt 218		Amount of Each Disbursement this Period 4000.00
City Los Angeles	State CA Zip Code 90027	
Purpose of Disbursement Research Consulting	Candidate Name	Transaction ID : SB17.4240
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	54679.06

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Fred Simon For Congress** Transaction ID : **SC/10.4102**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Dr. Fred J. Simon Jr.** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
 800 Country Club Ln

City State ZIP Code
 Coronado CA 92118

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
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TERMS

Date Incurred M 06 / D 28 / Y 2013	Date Due M / D / Y None	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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 ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. 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).....	▶	100000.00
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**

NAME OF COMMITTEE (In Full) **Fred Simon For Congress** Transaction ID : **SC/10.4123**

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Fred J. Simon Jr.	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 800 Country Club Ln		

City	State	ZIP Code
Coronado	CA	92118

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
300000.00	0.00	300000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 08 / D 23 / Y 2013	M / D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="300000.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text" value="400000.00"/>

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Fred Simon For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor B2B Website Design (Jan Sarvas)	Nature of Debt (Purpose): Website Design
Mailing Address 8524 N 50th Place	
City State Zip Code Paradise Valley AZ 85253	

Outstanding Balance Beginning This Period <input type="text" value="3768.75"/>	Transaction ID : SD10.4124	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3768.75"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Thompson Smith	Nature of Debt (Purpose): Photography
Mailing Address 12978 Caminito Bodega	
City State Zip Code Del Mar CA 92014	

Outstanding Balance Beginning This Period <input type="text" value="1012.50"/>	Transaction ID : SD10.4125	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1012.50"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>