

SUMMARY PAGE

Write or Type Committee Name

SCOTT HEYDENFELDT FOR CONGRESS

Report Covering the Period: From:

7 0 ' 9 8 ' 2 0 ' 1 4

To:

7 2 ' 1 8 ' 2 0 ' 1 4

**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))....

000

100000

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

000

000

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

000

100000

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17).....

000

1002915

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

000

000

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

000

1002915

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

000

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

000

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

000

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

II. DISBURSEMENTS

**COLUMN A
Total This Period**

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

17. OPERATING EXPENDITURES.....	000	1,002,915
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	000	000
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	000	000
(b) Of All Other Loans.....	000	000
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	000	000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	000	000
(b) Political Party Committees.....	000	000
(c) Other Political Committees (such as PACs).....	000	000
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	000	000
21. OTHER DISBURSEMENTS.....	000	000
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	000	000

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	000
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	000
25. SUBTOTAL (add Line 23 and Line 24).....	000
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	000
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	000

FROM FORM 1001

**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 / OF /

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SCOTT HEYDENFELDT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

SCOTT HEYDENFELDT FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

HEYDENFELDT, SCOTT M.

Election:

Primary
 General
 Other (specify) ▼

Mailing Address

12492 KUMQUAT PL.

City

CHINO

State

CA

ZIP Code

91710

Original Amount of Loan

000

Cumulative Payment To Date

000

Balance Outstanding at Close of This Period

913598

TERMS

Date Incurred

04 / 29 / 2014

Date Due

None

Interest Rate

000 % (apr)

Secured:

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 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)..... ▶

[]

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

913598

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

2014-11-11 10:11:11

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
 Information found on
 Page of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <i>SCOTT HEYDENFELDT FOR CONGRESS</i>	FEC IDENTIFICATION NUMBER C 00560474
--	--

LENDING INSTITUTION (LENDER) Full Name <i>N/A</i>	Amount of Loan <input type="text"/>	Interest Rate (APR) <input type="text"/> %
---	--	---

Mailing Address	Date Incurred or Established	M M / D D / Y Y Y Y Y Y	D D / D D / Y Y Y Y Y Y	Y Y Y Y Y Y
City State Zip Code	Date Due	M M / D D / Y Y Y Y Y Y	D D / D D / Y Y Y Y Y Y	Y Y Y Y Y Y

A. Has loan been restructured? No Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____

What is the value of this collateral?

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account: _____

Date account established: Address: _____

City, State, Zip: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name <i>SCOTT HEYDENFELDT</i> Signature <i>[Signature]</i>	DATE 12 / 15 / 2014
---	-------------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	DATE <input type="text"/>
Title	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 1 OF 1

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

SCOTT HEYDENFELT FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):	
<i>N/A</i>			
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period			
[Empty box]			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
[Empty box]		[Empty box]	[Empty box]
B. 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			
[Empty box]			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
[Empty box]		[Empty box]	[Empty box]
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			
[Empty box]			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
[Empty box]		[Empty box]	[Empty box]

1) SUBTOTALS This Period This Page (optional)	[Empty box]
2) TOTALS This Period (last page this line number only)	[Empty box]
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<i>913598</i>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<i>913598</i>

BOOK ONLINE

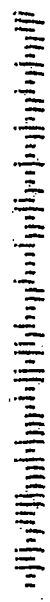
SCOTT HEYOENFLOT
12492 Kungwaat Pl.
Chino, CA 91710

10001 01011 10001



RECEIVED
2014 DEC 22 AM 8:49
FEC MAIL CENTER

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



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

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

JS
 PREPARER

12/22/14
 DATE PREPARED

FORM 1001-1004