



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**JACK ORSWELL 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))....	61548.00	67503.00
(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)).....	61548.00	67503.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	6050.95	27217.53
(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)).....	6050.95	27217.53
8. Cash on Hand at Close of Reporting Period (from Line 27).....	72182.40	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	10000.00	

**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

**JACK ORSWELL FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	60250.00	66150.00
(ii) Unitemized.....	1298.00	1353.00
(iii) TOTAL of contributions from individuals ▶	61548.00	67503.00
(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))..	61548.00	67503.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	10000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	10000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	1365.38
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	61548.00	78868.38

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6050.95	27217.53
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	10000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	10000.00
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	6050.95	37217.53

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	16685.35
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	61548.00
25. SUBTOTAL (add Line 23 and Line 24).....	78233.35
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6050.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	72182.40

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

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

FOR LINE NUMBER: PAGE 5 OF 23  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

NAME OF COMMITTEE (In Full)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Peter Amundson**

Mailing Address 275 W. Longden Ave

City Arcadia State CA Zip Code 91007

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

Name of Employer Minuteman Transport Occupation President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2015

**Transaction ID : SA11AI.5452**

Amount of Each Receipt this Period  
 500.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Philip Andreen**

Mailing Address 965 Hugo Reid Dr.

City Arcadia State CA Zip Code 91007

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2015

**Transaction ID : SA11AI.5513**

Amount of Each Receipt this Period  
 500.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Kevin Baines**

Mailing Address 2275 Huntington Dr.

City San Marino State CA Zip Code 91108

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

Name of Employer JPL/Caltech Occupation Research Scientist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2015

**Transaction ID : SA11AI.5455**

Amount of Each Receipt this Period  
 500.00  
 Contribution

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

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

1500.00

**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 23
	<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)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**James Barger**

Mailing Address 2153 Adair St.

City San Marino State CA Zip Code 91108

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

Name of Employer Pacific Custom Pools Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2015

**Transaction ID : SA11AI.5456**

Amount of Each Receipt this Period  
 2700.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**James Barger**

Mailing Address 2153 Adair St.

City San Marino State CA Zip Code 91108

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

Name of Employer Pacific Custom Pools Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2015

**Transaction ID : SA11AI.5457**

Amount of Each Receipt this Period  
 2700.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**David Berkus**

Mailing Address 1430 Glencoe Dr

City Arcadia State CA Zip Code 91006

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2015

**Transaction ID : SA11AI.5466**

Amount of Each Receipt this Period  
 500.00

Contribution

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

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

5900.00

**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 23
	<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)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Jane Boggs**

Mailing Address 1480 St. Albans Rd

City San MARino State CA Zip Code 91108

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2015

**Transaction ID : SA11AI.5447**

Amount of Each Receipt this Period  
 2700.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Norman T Booth Jr.**

Mailing Address 1589 N. Grand Oaks Ave

City Pasadena State CA Zip Code 91104

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.5493**

Amount of Each Receipt this Period  
 500.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Arden Boren**

Mailing Address 2392 S. Bateman Ave

City Irwindale State CA Zip Code 91010

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

Name of Employer Pacific National Group Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.5487**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

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

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

4200.00

**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 23
	<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)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Janet Braun**

Mailing Address 2040 Edgewood Dr.

City South PAsadena State CA Zip Code 91030

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.5474**

Amount of Each Receipt this Period  
 Contribution 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Douglas Ian Campbell**

Mailing Address 3220 Barnes Circle

City Glendale State CA Zip Code 91208

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.5483**

Amount of Each Receipt this Period  
 Contribution 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Stephen Colley**

Mailing Address 3355 Rubio Canyon Rd

City Altadena State CA Zip Code 91001

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

Name of Employer n/a Occupation retired software engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2015

**Transaction ID : SA11AI.5496**

Amount of Each Receipt this Period  
 Contribution 250.00

**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 9 OF 23
	<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)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Cunningham**

Mailing Address 2306 Glen Canyon Rd.

City Altadena State CA Zip Code 91001

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2015

**Transaction ID : SA11AI.5507**

Amount of Each Receipt this Period  
 500.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Bruce G Davis**

Mailing Address 7020 La Presa Dr.

City San Gabriel State CA Zip Code 91775

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.5481**

Amount of Each Receipt this Period  
 2700.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Ben Garrett**

Mailing Address 304 N Old Ranch Rd

City Arcadia State CA Zip Code 91007

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

Name of Employer CEO Occupation Casner Consolidated

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2015

**Transaction ID : SA11AI.5497**

Amount of Each Receipt this Period  
 500.00  
 Contribution

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

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

3700.00

**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 10 OF 23
	<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)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Betty Gobrecht**

Mailing Address 3575 Newhaven Rd.

City Pasadena State CA Zip Code 91107

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.5482**

Amount of Each Receipt this Period  
 1500.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Robert Gobrecht**

Mailing Address 1930 Bent Creek Dr

City Colorado Springs State CO Zip Code 91107

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2015

**Transaction ID : SA11AI.5501**

Amount of Each Receipt this Period  
 250.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Barbara Heublin**

Mailing Address 1755 Rubio Dr.

City San Marino State CA Zip Code 91108

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2015

**Transaction ID : SA11AI.5445**

Amount of Each Receipt this Period  
 250.00  
 ontribution

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

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

2000.00

**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 11 OF 23
	<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)  
**JACK ORSWELL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ronald Jenkins</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 07 / 2015
Mailing Address 1990 Santa Anita Ave		<b>Transaction ID : SA11AI.5458</b>
City State Zip Code South El Monte CA 91733	Amount of Each Receipt this Period Contribution 1000.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation N/a Retired	Amount of Each Receipt this Period Contribution 1000.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Eileen Leech</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 07 / 2015
Mailing Address 1905 Country Ln		<b>Transaction ID : SA11AI.5449</b>
City State Zip Code Pasadena CA 91107	Amount of Each Receipt this Period Contribution 2700.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired Attorney	Amount of Each Receipt this Period Contribution 2700.00
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>C. Eileen Leech</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 07 / 2015
Mailing Address 1905 Country Ln		<b>Transaction ID : SA11AI.5450</b>
City State Zip Code Pasadena CA 91107	Amount of Each Receipt this Period Contribution 2700.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired Attorney	Amount of Each Receipt this Period Contribution 5400.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6400.00
<b>TOTAL</b> This Period (last page this line number only).....	6400.00

**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 12 OF 23
	<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)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ken Leech**

Mailing Address 1905 Country Ln

City Pasadena State CA Zip Code 91107

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

Name of Employer Western Asset Management Occupation Investment Counselor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 07 / 2015

**Transaction ID : SA11AI.5448**

Amount of Each Receipt this Period  
 2700.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Ken Leech**

Mailing Address 1905 Country Ln

City Pasadena State CA Zip Code 91107

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

Name of Employer Western Asset Management Occupation Investment Counselor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 07 / 2015

**Transaction ID : SA11AI.5451**

Amount of Each Receipt this Period  
 2700.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Matthew Lin**

Mailing Address 1050 Oak Grove Ave

City San MARino State CA Zip Code 91108

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

Name of Employer N/A Occupation Physician

Receipt For: 2015  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.5538**

Amount of Each Receipt this Period  
 2700.00

Contribution

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

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

8100.00

**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 13 OF 23
	<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)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LOS ANGELES COUNTY LINCOLN CLUB**

Mailing Address **50 E FOOTHILL BOULEVARD**  
**FLOOR 3**

City **ARCADIA** State **CA** Zip Code **91006**

FEC ID number of contributing federal political committee. **C C00248658**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 24 / 2015**

**Transaction ID : SA11AI.5510**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1000.00**

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Arthur Ludwick**

Mailing Address **1125 N Easley Canyon Rd**

City **Glendora** State **CA** Zip Code **91741**

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

Name of Employer \_\_\_\_\_ Occupation **Retired**

Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 07 / 2015**

**Transaction ID : SA11AI.5459**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Beverly Marksbury**

Mailing Address **427 So. El Molino Ave**  
**Unit B**

City **Pasadena** State **CA** Zip Code **91101**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 24 / 2015**

**Transaction ID : SA11AI.5508**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

Contribution

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

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

\_\_\_\_\_ **2000.00**

\_\_\_\_\_

**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 14 OF 23
	<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)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Edward Mittlman**

Mailing Address 2015 El Vista CTR

City: Glendale State: CA Zip Code: 91208

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

Name of Employer: N/A Occupation: Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 07 / 2015

**Transaction ID : SA11AI.5453**

Amount of Each Receipt this Period: 1000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Edward Mittlman**

Mailing Address 2015 El Vista CTR

City: Glendale State: CA Zip Code: 91208

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

Name of Employer: N/A Occupation: Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 09 / 15 / 2015

**Transaction ID : SA11AI.5491**

Amount of Each Receipt this Period: 500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Suzanne Paine**

Mailing Address 458 N. California St.

City: San Gabriel State: CA Zip Code: 91775

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

Name of Employer: None Occupation: Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 15 / 2015

**Transaction ID : SA11AI.5495**

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 15 OF 23
	<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)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ernest Posey**

Mailing Address 1001 Singing Wood Dr

City Arcadia State CA Zip Code 91006

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

Name of Employer Posey Corporation Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.5490**

Amount of Each Receipt this Period  
 Contribution 500.00

**B.** Full Name (Last, First, Middle Initial)  
**James Riley**

Mailing Address 1021 E Becklee Rd

City Glendora State CA Zip Code 91741

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.5477**

Amount of Each Receipt this Period  
 Contribution 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Lois Roskopf**

Mailing Address 1420 Santo Domingo Ave

City Duarte State CA Zip Code 91010

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.5488**

Amount of Each Receipt this Period  
 Contribution 2700.00

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

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

4200.00

**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 16 OF 23
	<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)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Rosskopf**

Mailing Address 1420 Santo Domingo Ave

City Duarte State CA Zip Code 91010

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.5489**

Amount of Each Receipt this Period  
 2700.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**David Scheidler**

Mailing Address 1597 Crest Dr.

City Altadena State CA Zip Code 91001

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

Name of Employer None Occupation Retired

Receipt For: 2015  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2015

**Transaction ID : SA11AI.5504**

Amount of Each Receipt this Period  
 2700.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Mary Sue Scheidler**

Mailing Address 1597 Crest Dr.

City Altadena State CA Zip Code 91001

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2015

**Transaction ID : SA11AI.5505**

Amount of Each Receipt this Period  
 2700.00  
 Contribution

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

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

8100.00



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

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

FOR LINE NUMBER: PAGE 17 OF 23  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ms Georgene L Smith**

Mailing Address 1470 Lomita Dr.

City Pasadena State CA Zip Code 91106

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

Name of Employer N/A Occupation Housewife

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11AI.5521**

Amount of Each Receipt this Period  
 Contribution 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms Maurice L Smith**

Mailing Address 1470 Lomita Dr.

City Pasadena State CA Zip Code 91106

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.5486**

Amount of Each Receipt this Period  
 Contribution 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**John Symes**

Mailing Address 1328 Oak Meadow Rd

City Arcadia State CA Zip Code 91006

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

Name of Employer Symes Pasadena Occupation President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2015

**Transaction ID : SA11AI.5506**

Amount of Each Receipt this Period  
 Contribution 2700.00

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

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

7700.00

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

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

FOR LINE NUMBER: PAGE 18 OF 23  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**JACK ORSWELL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Symes**

Mailing Address 1328 Oak Meadow Rd

City Arcadia State CA Zip Code 91006

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

Name of Employer Symes Pasadena Occupation Co-Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11AI.5519**

Amount of Each Receipt this Period  
 2700.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Lucille Washburn**

Mailing Address 3625 Greenhill Rd

City Pasadena State CA Zip Code 91107

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.5537**

Amount of Each Receipt this Period  
 250.00  
 Contribution

**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

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

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

2950.00

60250.00

**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 19 OF 23		
	<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)  
**JACK ORSWELL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Blue Host</b>		Date of Disbursement MM / DD / YYYY 09 / 08 / 2015
Mailing Address 560 Timpanogos Pkwy		Amount of Each Disbursement this Period 263.76 <b>Transaction ID : SB17.5529</b>
City Orem Utan	State UT Zip Code 84097	
Purpose of Disbursement Website maintenance	Category/Type 003	
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 27		

Full Name (Last, First, Middle Initial) <b>B. Blue Host</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 560 Timpanogos Pkwy		Amount of Each Disbursement this Period 27.87 <b>Transaction ID : SB17.5530</b>
City Orem Utan	State UT Zip Code 84097	
Purpose of Disbursement Website Hosting	Category/Type 003	
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 27		

Full Name (Last, First, Middle Initial) <b>c. Bob Booker Consulting</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 2347 Daybreak Dr		Amount of Each Disbursement this Period 1764.05 <b>Transaction ID : SB17.5471</b>
City La Verne	State CA Zip Code 91750	
Purpose of Disbursement Campaign Consulting	Category/Type 003	
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 27		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2055.68
<b>TOTAL</b> 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 20 OF 23	
	<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)  
**JACK ORSWELL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bob Booker Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 2347 Daybreak Dr		Amount of Each Disbursement this Period 1939.80 <b>Transaction ID : SB17.5473</b>
City La Verne	State CA	
Zip Code 91750	Purpose of Disbursement Campaign Consulting	Category/ Type 003
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 27	

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2015
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : SB17.5462</b>
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Web Advertising	Category/ Type 003
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 27	

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : SB17.5528</b>
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Web Advertising	Category/ Type 001
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 27	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1999.80
<b>TOTAL</b> 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 21 OF 23		
	<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)  
**JACK ORSWELL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Marriott Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015
Mailing Address 555 McMurray Rd.		Amount of Each Disbursement this Period 512.20 <b>Transaction ID : SB17.5464</b>
City Santa Inez State CA Zip Code 93427	Purpose of Disbursement Lodging 003 Category/Type	
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Nation Builder</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 448 S. Hill St. Suite 200		Amount of Each Disbursement this Period 43.00 <b>Transaction ID : SB17.5461</b>
City Los Angeles State CA Zip Code 90013	Purpose of Disbursement Web Advertising 003 Category/Type	
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Nation Builder</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 448 S. Hill St. Suite 200		Amount of Each Disbursement this Period 43.00 <b>Transaction ID : SB17.5463</b>
City Los Angeles State CA Zip Code 90013	Purpose of Disbursement Web Advertising 003 Category/Type	
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	598.20
<b>TOTAL</b> 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 22 OF 23	
	<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)  
**JACK ORSWELL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Nation Builder</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 448 S. Hill St. Suite 200		Amount of Each Disbursement this Period 43.00 <b>Transaction ID : SB17.5527</b>
City Los Angeles State CA Zip Code 90013	Purpose of Disbursement Website advertising 001 Category/Type	
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 27		

Full Name (Last, First, Middle Initial) <b>B. PayPal</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2015
Mailing Address 2111 N. First St.		Amount of Each Disbursement this Period 165.20 <b>Transaction ID : SB17.5516</b>
City San Jose State CA Zip Code 95131	Purpose of Disbursement Credit Card Fees 003 Category/Type	
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 27		

Full Name (Last, First, Middle Initial) <b>c. Political Visions</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 1912 Grand Ave		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.5444</b>
City San Rafael State CA Zip Code 94901	Purpose of Disbursement Bookkeeping 001 Category/Type	
Candidate Name <b>JACK ORSWELL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 27		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1108.20
<b>TOTAL</b> This Period (last page this line number only).....	5761.88

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **JACK ORSWELL FOR CONGRESS** Transaction ID : **SC/10.5421**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Mr. JACK E ORSWELL** *[PERSONAL FUNDS]* Election: 2016  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1161 VOLANTE DRIVE

City State ZIP Code  
ARCADIA CA 91007

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred: M 04 / D 15 / Y 2015  
Date Due: M / D / Y 6/8/2016  
Interest Rate: 0.00 % (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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	10000.00

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