

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
LANCASTER 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)).... | 5000.00 | 5100.00 |
| (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))..... | 5000.00 | 5100.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 5250.00 | 5250.00 |
| (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))..... | 5250.00 | 5250.00 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 250.00 | |
| 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)..... | 650.00 | |

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

LANCASTER 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)..... | 0.00 | 0.00 |
| (ii) Unitemized..... | 0.00 | 100.00 |
| (iii) TOTAL of contributions from individuals ▶ | 0.00 | 100.00 |
| (b) Political Party Committees..... | 5000.00 | 5000.00 |
| (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)).. | 5000.00 | 5100.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 400.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 400.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 5000.00 | 5500.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 5250.00 | 5250.00 |
| 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) ► | 5250.00 | 5250.00 |

III. CASH SUMMARY

| | |
|---|---------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 500.00 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 5000.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 5500.00 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 5250.00 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 250.00 |

**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 8
(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)
LANCASTER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SANTA CLARA COUNTY REPUBLICAN PARTY(FED)

Mailing Address 522 N MONROE STREET

City SAN JOSE State CA Zip Code 95128

FEC ID number of contributing federal political committee. **C** C00415075

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : SA11B.4110

Amount of Each Receipt this Period
 5000.00

Memo Item
 In-kind -

B. 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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

5000.00

5000.00

**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 6 OF 8 |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 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)
LANCASTER FOR CONGRESS

| | | | | | | | | | | | | |
|--|---|--|--------|---------|-----|---|---------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | |
| A. Political Visions | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>24</td> <td></td> <td>2016</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 05 | | 24 | | 2016 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 05 | | 24 | | 2016 | | | | | | | | |
| Mailing Address 1912 Grand Ave | | Amount of Each Disbursement this Period | | | | | | | | | | |
| City San Rafael State CA Zip Code 94901 | | <table border="1"> <tr> <td>250.00</td> </tr> </table> | 250.00 | | | | | | | | | |
| 250.00 | | | | | | | | | | | | |
| Purpose of Disbursement Bookkeeping | | <input type="checkbox"/> Memo Item | | | | | | | | | | |
| Candidate Name LANCASTER FOR CONGRESS | | Transaction ID : SB17.4116 | | | | | | | | | | |
| 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: 19 | | | | | | | | | | | | |

| | | | | | | | | | | | | |
|--|---|--|---------|---------|-----|---|---------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | |
| B. SANTA CLARA COUNTY REPUBLICAN PARTY(FED) | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>31</td> <td></td> <td>2016</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 05 | | 31 | | 2016 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 05 | | 31 | | 2016 | | | | | | | | |
| Mailing Address 522 N MONROE STREET | | Amount of Each Disbursement this Period | | | | | | | | | | |
| City SAN JOSE State CA Zip Code 95128 | | <table border="1"> <tr> <td>5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | |
| Purpose of Disbursement In-kind - | | <input type="checkbox"/> Memo Item | | | | | | | | | | |
| Candidate Name | | Transaction ID : SB17.4111 | | | | | | | | | | |
| Office Sought: <input 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: District: | | | | | | | | | | | | |

| | | | | | | | | | | | | |
|--|---|--|-----|---------|-----|---|---------|--|--|--|--|--|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | |
| C. | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> | M M | / | D D | / | Y Y Y Y | | | | | |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| | | | | | | | | | | | | |
| Mailing Address | | Amount of Each Disbursement this Period | | | | | | | | | | |
| City State Zip Code | | <table border="1"> <tr> <td></td> </tr> </table> | | | | | | | | | | |
| | | | | | | | | | | | | |
| Purpose of Disbursement | | <input type="checkbox"/> Memo Item | | | | | | | | | | |
| 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)..... | 5250.00 |
| TOTAL This Period (last page this line number only)..... | 5250.00 |

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

NAME OF COMMITTEE (In Full) **LANCASTER FOR CONGRESS** Transaction ID : **SC/10.4104**

LOAN SOURCE Full Name (Last, First, Middle Initial) **GORDON K LANCASTER** *PERSONAL FUNDS* Memo Item
 Election: 2016
 Primary
 General
 Other (specify) ▼

Mailing Address
7903 CALEDONIA DR
 City State ZIP Code
 SAN JOSE CA 95135

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 400.00 | 0.00 | 400.00 |

TERMS
 Date Incurred: M 05 / D 09 / Y 2016
 Date Due: M / D / Y 6/7/2016
 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: [] |

| | | |
|--|---|------------|
| SUBTOTALS This Period This Page (optional)..... | ▶ | [] 400.00 |
| TOTALS This Period (last page in this line only)..... | ▶ | [] 400.00 |

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)

LANCASTER FOR CONGRESS

| | | |
|--|----------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Visions | | Nature of Debt (Purpose): Bookkeeping |
| Mailing Address 1912 Grand Ave | | |
| City State | Zip Code | |
| San Rafael CA | 94901 | |

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID : SD10.4114 | |
| 0.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 500.00 | 250.00 | 250.00 |

| | | |
|--|----------|---------------------------|
| 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 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |

| | | |
|--|----------|---------------------------|
| 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 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |

| | |
|--|--------|
| 1) SUBTOTALS This Period This Page (optional) | 250.00 |
| 2) TOTALS This Period (last page this line number only) | 250.00 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | 400.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | 650.00 |