

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Bob Dutton for Congress

ADDRESS (number and street)

30151 Tomas

Check if different than previously reported. (ACC)

Rancho Santa Margarita

CA

92688

2. FEC IDENTIFICATION NUMBER

C C00509836

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

CA

31

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

X

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2013

through

M M / D D / Y Y Y Y

03 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Betty Presley

Signature of Treasurer Betty Presley

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 09 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Bob Dutton 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)).... | 5570.70 | 5570.70 |
| (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))..... | 5570.70 | 5570.70 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 10020.04 | 24087.39 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 2903.00 | 2903.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 7117.04 | 21184.39 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 827.26 | |
| 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)..... | 150000.00 | |

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

Bob Dutton 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)..... | 750.00 | 750.00 |
| (ii) Unitemized..... | 0.00 | 0.00 |
| (iii) TOTAL of contributions from individuals ▶ | 750.00 | 750.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 4820.70 | 4820.70 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 5570.70 | 5570.70 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 2903.00 | 2903.00 |
| 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)..... ▶ | 8473.70 | 8473.70 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 10020.04 | 24087.39 |
| 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) ► | 10020.04 | 24087.39 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 2373.60 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 8473.70 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 10847.30 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 10020.04 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 827.26 |

**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 22 |
| | <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 | |

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)
Bob Dutton for Congress

A. Full Name (Last, First, Middle Initial)
Brett Guge

Mailing Address 1781 N Wilson

City Upland State CA Zip Code 91784

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

Name of Employer California Steel Occupation Executive VP, Finance & Administration

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013

Transaction ID : INCA808

Amount of Each Receipt this Period
 750.00

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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).....

750.00

750.00

**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 22 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
Bob Dutton for Congress

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) Bob Dutton - Personal Funds | | Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 16 / 2013 | |
| Mailing Address 4959 Palomino Place | | Transaction ID : PAYA799 | |
| City Rancho Cucamonga State CA Zip Code 91737 | Amount of Each Receipt this Period 910.86 | | |
| FEC ID number of contributing federal political committee. C | Credit Card Payment | | |
| Name of Employer State of California Occupation Senator | Amount of Each Receipt this Period 0.00 | | |
| Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 0.00 | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) Bob Dutton - Personal Funds | | Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 16 / 2013 | |
| Mailing Address 4959 Palomino Place | | Transaction ID : PAYA800 | |
| City Rancho Cucamonga State CA Zip Code 91737 | Amount of Each Receipt this Period 3909.84 | | |
| FEC ID number of contributing federal political committee. C | Credit Card Payment | | |
| Name of Employer State of California Occupation Senator | Amount of Each Receipt this Period 0.00 | | |
| Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 0.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) | | Date of Receipt M M / D D / Y Y Y Y Y Y | |
| Mailing Address | | M M / D D / Y Y Y Y Y Y | |
| City State Zip Code | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | Credit Card Payment | | |
| Name of Employer Occupation | Amount of Each Receipt this Period | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 4820.70 |
| TOTAL This Period (last page this line number only)..... | 4820.70 |

**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 7 OF 22 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
Bob Dutton for Congress

A. Full Name (Last, First, Middle Initial)
San Bernardino Registrar of Voters

Mailing Address 777 E Rialto Ave

City San Bernardino State CA Zip Code 92415

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2903.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013

Transaction ID : INCA807

Amount of Each Receipt this Period
2903.00

Refund

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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).....

2903.00

2903.00

**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 8 OF 22 | |
| | <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)
Bob Dutton for Congress

Full Name (Last, First, Middle Initial)
A. Cardservices

Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 14 / 2013

Amount of Each Disbursement this Period: 300.00

Transaction ID : EXPB795

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. Nuvio

Mailing Address 340 S Lemon Ave #9233

City Los Angeles State CA Zip Code 91789

Purpose of Disbursement Web Costs

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 14 / 2013

Amount of Each Disbursement this Period: 18.73

Transaction ID : PDTB44EXPB795

[MEMO ITEM]

Category/Type: 001

Full Name (Last, First, Middle Initial)
c. Telephone Town Hall Meeting, Inc.

Mailing Address 958 Coneflower Drive

City Golden State CO Zip Code 80401

Purpose of Disbursement Tele Town Hall Costs

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 14 / 2013

Amount of Each Disbursement this Period: 309.66

Transaction ID : PDTB43EXPB795

[MEMO ITEM]

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 300.00

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 9 OF 22 | |
| | <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)
Bob Dutton for Congress

Full Name (Last, First, Middle Initial)
A. Cardservices

Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 16 / 2013

Amount of Each Disbursement this Period: 910.86

Transaction ID : PAYBFT799

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Benchmark Email

Mailing Address 10621 Calle Lee, Building 141

City Los Alamitos State CA Zip Code 90720

Purpose of Disbursement Web Costs

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 16 / 2013

Amount of Each Disbursement this Period: 344.95

Transaction ID : PDTB45PAYBFT799

[MEMO ITEM]

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

Mailing Address 340 S Lemon Ave #9233

City Los Angeles State CA Zip Code 91789

Purpose of Disbursement Web Costs

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 16 / 2013

Amount of Each Disbursement this Period: 468.34

Transaction ID : PDTB46PAYBFT799

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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 10 OF 22 | | | |
| | <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)
Bob Dutton for Congress

Full Name (Last, First, Middle Initial)
A. Cardservices

Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement
Credit Card Payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 16 / 2013

Amount of Each Disbursement this Period
3909.84

Transaction ID : PAYBFT800

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Bob Dutton - Personal Funds

Mailing Address 4959 Palomino Place

City Rancho Cucamonga State CA Zip Code 91737

Purpose of Disbursement
Credit Card Payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 16 / 2013

Amount of Each Disbursement this Period
910.86

Transaction ID : PAYB799

Full Name (Last, First, Middle Initial)
c. Bob Dutton - Personal Funds

Mailing Address 4959 Palomino Place

City Rancho Cucamonga State CA Zip Code 91737

Purpose of Disbursement
Credit Card Payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 16 / 2013

Amount of Each Disbursement this Period
3909.84

Transaction ID : PAYB800

SUBTOTAL of Disbursements This Page (optional)..... 4820.70

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 22 | |
| | <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)
Bob Dutton for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Betty Presley & Associates, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2013 |
| Mailing Address 30151 Tomas | | Amount of Each Disbursement this Period 200.00 Transaction ID : EXPB805 |
| City Rancho Sta Margari | State CA Zip Code 92688 | |
| Purpose of Disbursement Financial Analyst | Category/Type 001 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Cardinal Communication Strategies LLC | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2013 |
| Mailing Address 925 University Ave #A | | Amount of Each Disbursement this Period 45.00 Transaction ID : EXPB801 |
| City Sacramento | State CA Zip Code 95825 | |
| Purpose of Disbursement Automated Calls Remainder | Category/Type 001 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Cardinal Communication Strategies LLC | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2013 |
| Mailing Address 925 University Ave #A | | Amount of Each Disbursement this Period 964.49 Transaction ID : EXPB803 |
| City Sacramento | State CA Zip Code 95825 | |
| Purpose of Disbursement Automated Calls | Category/Type 001 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1209.49 |
| 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 22 | | | |
| | <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)
Bob Dutton for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Bank of America | | Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013 |
| Mailing Address 31531 Santa Margarita Pkwy | | Amount of Each Disbursement this Period 29.95 Transaction ID : EXPB809 |
| City Rancho Sta Margari | State CA Zip Code 92688 | |
| Purpose of Disbursement Bank Fee | 001 Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Bank of America | | Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2013 |
| Mailing Address 31531 Santa Margarita Pkwy | | Amount of Each Disbursement this Period 29.95 Transaction ID : EXPB810 |
| City Rancho Sta Margari | State CA Zip Code 92688 | |
| Purpose of Disbursement Bank Fee | 001 Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Betty Presley & Associates, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2013 |
| Mailing Address 30151 Tomas | | Amount of Each Disbursement this Period 600.00 Transaction ID : EXPB813 |
| City Rancho Sta Margari | State CA Zip Code 92688 | |
| Purpose of Disbursement Financial Analyst | 001 Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 659.90 |
| 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 22 | |
| | <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)
Bob Dutton for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Sean Dillon | | Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2013 |
| Mailing Address 1410 D Street SE | | Amount of Each Disbursement this Period 3000.00 Transaction ID : EXPB811 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement Campaign Consulting Services | Category/Type 001 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Bank of America | | Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2013 |
| Mailing Address 31531 Santa Margarita Pkwy | | Amount of Each Disbursement this Period 29.95 Transaction ID : EXPB812 |
| City Rancho Sta Margari | State CA Zip Code 92688 | |
| Purpose of Disbursement Bank Fee | Category/Type 001 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| 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 | 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)..... | 3029.95 |
| TOTAL This Period (last page this line number only)..... | 10020.04 |

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Bob Dutton for Congress** Transaction ID : **PAYC2**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Bob Dutton - Personal Funds

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
4959 Palomino Place

City State ZIP Code
 Rancho Cucamonga CA 91737

| | | |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan 5000.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 5000.00 |
|------------------------------------|------------------------------------|--|

TERMS

Date Incurred: M 01 / D 18 / Y 2012
 Date Due: M / D / Y . None
 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)..... ▶ 5000.00

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

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)
Bob Dutton for Congress

Transaction ID : **PAYC101**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Bob Dutton - Personal Funds

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
4959 Palomino Place

City State ZIP Code
Rancho Cucamonga CA 91737

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 26000.00 | 0.00 | 26000.00 |

TERMS

Date Incurred: M 03 / D 19 / Y 2012
 Date Due: M / D / Y . None
 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)..... ▶ 26000.00

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

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)
Bob Dutton for Congress

Transaction ID : **PAYC179**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Bob Dutton - Personal Funds

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
4959 Palomino Place

City State ZIP Code
Rancho Cucamonga CA 91737

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 9000.00 | 0.00 | 9000.00 |

TERMS

Date Incurred: M 04 / D 30 / Y 2012
 Date Due: M / D / Y . None
 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)..... ▶ 9000.00

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) **Bob Dutton for Congress** Transaction ID : **PAYC195**

| | |
|--|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Bob Dutton - Personal Funds | Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 4959 Palomino Place | |

| | | |
|------------------|-------|----------|
| City | State | ZIP Code |
| Rancho Cucamonga | CA | 91737 |

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

TERMS

| | | | |
|----------------------|------------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| M 05 / D 07 / Y 2012 | 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: [] |
| 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)..... | ▶ | 10000.00 |
| 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

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)
Bob Dutton for Congress

Transaction ID : **PAYC446**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Bob Dutton - Personal Funds

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
4959 Palomino Place

City State ZIP Code
Rancho Cucamonga CA 91737

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 25000.00 | 0.00 | 25000.00 |

TERMS

Date Incurred: M 08 / D 17 / Y 2012
 Date Due: M / D / Y . None
 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)..... ▶ 25000.00

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) **Bob Dutton for Congress** Transaction ID : **PAYC557**

| | |
|--|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Bob Dutton - Personal Funds | Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 4959 Palomino Place | |

| | | |
|------------------|-------|----------|
| City | State | ZIP Code |
| Rancho Cucamonga | CA | 91737 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 25000.00 | 0.00 | 25000.00 |

TERMS

| | | | |
|----------------|----------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| 09 / 19 / 2012 | 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: |
| 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)..... | 25000.00 |
| 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

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)
Bob Dutton for Congress

Transaction ID : **PAYC590**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Bob Dutton - Personal Funds

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
4959 Palomino Place

City State ZIP Code
Rancho Cucamonga CA 91737

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 50000.00 | 0.00 | 50000.00 |

TERMS

Date Incurred: M 09 / D 29 / Y 2012
 Date Due: M / D / Y . None
 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)..... | 50000.00 |
| TOTALS This Period (last page in this line only)..... | 150000.00 |

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

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Bob Dutton for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Betty Presley & Associates, Inc.

Mailing Address 30151 Tomas

City State Zip Code
Rancho Sta Margarita CA 92688

Nature of Debt (Purpose):
Financial Analyst

Outstanding Balance Beginning This Period **Transaction ID : PAYD797**
200.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 200.00 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cardinal Communication Strategies LLC

Mailing Address 925 University Ave #A

City State Zip Code
Sacramento CA 95825

Nature of Debt (Purpose):
Automated Calls Remainder

Outstanding Balance Beginning This Period **Transaction ID : PAYD789**
45.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 45.00 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cardinal Communication Strategies LLC

Mailing Address 925 University Ave #A

City State Zip Code
Sacramento CA 95825

Nature of Debt (Purpose):
Automated Calls

Outstanding Balance Beginning This Period **Transaction ID : PAYD790**
964.49

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 964.49 0.00

| | |
|--|------|
| 1) SUBTOTALS This Period This Page (optional) | 0.00 |
| 2) TOTALS This Period (last page this line number only) | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | |

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Bob Dutton for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cardservices

Mailing Address PO Box 94014

City State Zip Code
Palatine IL 60094

Nature of Debt (Purpose):
Credit Card Payment

| | | |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID : PAYD791 | |
| 4209.84 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| -3909.84 | 300.00 | 0.00 |

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cardservices

Mailing Address PO Box 94014

City State Zip Code
Palatine IL 60094

Nature of Debt (Purpose):
Credit Card Payment

| | | |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID : PAYD798 | |
| 910.86 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| -910.86 | 0.00 | 0.00 |

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

| | | |
|---|---------------------|---|
| 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) | 0.00 |
| 2) TOTALS This Period (last page this line number only) | 0.00 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | |