

# 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  
**Steve Crass for Congress**

ADDRESS (number and street) 5132 N Palm Avenue  
PMB 232  
 Check if different than previously reported. (ACC) Fresno CA 93704-2236

2. **FEC IDENTIFICATION NUMBER** C00554543 **CITY** **STATE** **ZIP CODE**  
3. IS THIS REPORT  **NEW (N)** **OR**  **AMENDED (A)** **STATE** **DISTRICT**  
CA 16

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 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 through M M / D D / Y Y Y Y  
05 / 15 / 2014 through 06 / 30 / 2014

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 Kelly Lawler  
Signature of Treasurer Kelly Lawler *[Electronically Filed]* Date M M / D D / Y Y Y Y  
07 / 15 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Steve Crass 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))....	10340	144817.12
(b) Total Contribution Refunds (from Line 20(d)) .....	3700	3900
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6640	140917.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	60898.83	134554.58
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	60898.83	134554.58
8. Cash on Hand at Close of Reporting Period (from Line 27).....	7862.54	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	7389.84	

**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

**Steve Crass 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).....	9615	71736.37
(ii) Unitemized.....	725	69755.85
(iii) TOTAL of contributions from individuals ▶	10340	141492.22
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) The Candidate.....	0	3324.9
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	10340	144817.12
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	0
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0	1800
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	10340	146617.12

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	60898.83	134554.58
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	3700	3900
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	3700	3900
21. OTHER DISBURSEMENTS .....	0	300
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	64598.83	138754.58

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	62121.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10340
25. SUBTOTAL (add Line 23 and Line 24).....	72461.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	64598.83
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	7862.54

**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 18
	<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)  
**Steve Crass for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Luxon C Kellogg**

Mailing Address 45 S State Highway 59

City Merced State CA Zip Code 95341-6917

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

Name of Employer Kellogg's Supply Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : A-CF398**

Amount of Each Receipt this Period  
**1300**

**B.** Full Name (Last, First, Middle Initial)  
**Joshua Metcalf**

Mailing Address 3964 Rivermark Plaza Suite 125

City Santa Clara State CA Zip Code 95054-4155

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

Name of Employer Del Mar Real Estate Group Occupation Real Estate Broker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : A-CF410**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Orman Communications**

Mailing Address 3589 W Buena Vista Avenue

City Fresno State CA Zip Code 93711-0107

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : A-CF425**

Amount of Each Receipt this Period  
**2600**

Not a Corporation

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

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

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

**4400.00**

**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 18
	<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)  
**Steve Crass for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Timothy Orman**

Mailing Address 3589 W Buena Vista Avenue

City State Zip Code  
Fresno CA 93711-0107

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

Name of Employer Occupation  
Orman Communications Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 02 / 2014**

**Transaction ID : A-PIP52**

Amount of Each Receipt this Period  
**2600**

Not a Corporation

**[MEMO ITEM]**  
Partnership Itemization Memo

**B.** Full Name (Last, First, Middle Initial)  
**Alicia Chavez**

Mailing Address 26648 Avenue 18 1/2

City State Zip Code  
Madera CA 93638-2739

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

Name of Employer Occupation  
Best Efforts Made Best Efforts Made

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 02 / 2014**

**Transaction ID : A-CF427**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**Juan G Ruelas**

Mailing Address 26648 Avenue 18 1/2

City State Zip Code  
Madera CA 93638-2739

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

Name of Employer Occupation  
Ruelas Enterprises, Inc. Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 02 / 2014**

**Transaction ID : A-CF426**

Amount of Each Receipt this Period  
**2500**

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

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

**5000.00**

**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 18
	<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)  
**Steve Crass for Congress**

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

Mailing Address 433 Bryan Ave

City Sunnyvale State CA Zip Code 94086

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

Name of Employer Cisco Systems Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **215**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : A-CF433**

Amount of Each Receipt this Period  
**215**

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>215.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>9615.00</b>

**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 18	
	<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)  
**Steve Crass for Congress**

Full Name (Last, First, Middle Initial) <b>A. CompleteCampaigns.com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 8.75 <b>Transaction ID : B-E-397</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Credit Card Processing Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Orman Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 3589 W Buena Vista Avenue		Amount of Each Disbursement this Period 403.96 <b>Transaction ID : B-E-392</b>
City Fresno State CA Zip Code 93711-0107	Purpose of Disbursement Data Lists and Maps 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lindsy Cosyns</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 1458 E Estancia Drive		Amount of Each Disbursement this Period 550.87 <b>Transaction ID : B-E-396</b>
City Merced State CA Zip Code 95340-9181	Purpose of Disbursement Administrative/Salary/Overhead: Payroll 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	963.58
<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 9 OF 18
	<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)  
**Steve Crass for Congress**

Full Name (Last, First, Middle Initial)  
**A. Arena Communications**

Mailing Address 1780 W Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104-5102

Purpose of Disbursement Design, Mailing, Printing and Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 17 / 2014

Amount of Each Disbursement this Period: 15373

Transaction ID : B-E-400

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**B. Lindsi Cosyns**

Mailing Address 1458 E Estancia Drive

City Merced State CA Zip Code 95340-9181

Purpose of Disbursement Postage, Data, Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 17 / 2014

Amount of Each Disbursement this Period: 282.09

Transaction ID : B-E-401

Category/Type: 001

Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial)  
**C. Orman Communications**

Mailing Address 3589 W Buena Vista Avenue

City Fresno State CA Zip Code 93711-0107

Purpose of Disbursement Radio and Television Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 19 / 2014

Amount of Each Disbursement this Period: 23741

Transaction ID : B-E-409

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional) ..... 39396.09

**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 18			
	<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)  
**Steve Crass for Congress**

Full Name (Last, First, Middle Initial) <b>A. CompleteCampaigns.com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 15 <b>Transaction ID : B-E-440</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Credit card processing fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fergus &amp; Company LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 567 E 5th Avenue		Amount of Each Disbursement this Period 360 <b>Transaction ID : B-E-414</b>
City Chico State CA Zip Code 95926-2601	Purpose of Disbursement Payroll service 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Arena Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 1780 W Sequoia Vista Circle		Amount of Each Disbursement this Period 13729 <b>Transaction ID : B-E-418</b>
City Salt Lake City State UT Zip Code 84104-5102	Purpose of Disbursement Mailing, Printing and Postage 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14104.00
<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 11 OF 18			
	<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)  
**Steve Crass for Congress**

Full Name (Last, First, Middle Initial) <b>A. CompleteCampaigns.com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 30 <b>Transaction ID : B-E-420</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Credit card processing fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Orman Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 3589 W Buena Vista Avenue		Amount of Each Disbursement this Period 1225 <b>Transaction ID : B-E-417</b>
City Fresno State CA Zip Code 93711-0107	Purpose of Disbursement Advertising: Television Advertising 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Visa - MSEFCU</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO Box 1151		Amount of Each Disbursement this Period 3173.85 <b>Transaction ID : B-E-423</b>
City Merced State CA Zip Code 95341-1151	Purpose of Disbursement Credit Card Payment:See Memos 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4428.85
<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 12 OF 18			
	<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)  
**Steve Crass for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Press Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 3685 W Gettysburg Avenue		Amount of Each Disbursement this Period 550.7
City Fresno	State CA	
Zip Code 93722-7839		
Purpose of Disbursement Printing	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. It's My Party</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 2892 N Sunnyside Avenue		Amount of Each Disbursement this Period 312.5
City Fresno	State CA	
Zip Code 93727-1370		
Purpose of Disbursement Fundraiser Rentals	Category/ Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Vista Ranch &amp; Cellars</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 7326 California 140		Amount of Each Disbursement this Period 2118.04
City Merced	State CA	
Zip Code 95340		
Purpose of Disbursement Fundraiser Catering	Category/ Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 13 OF 18			
	<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)  
**Steve Crass for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address PO Box 537104		Amount of Each Disbursement this Period 126.1
City Atlanta	State GA	
Zip Code 30353-7104	Purpose of Disbursement Telephone	<b>Transaction ID : B-S-58</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Visa - MSEFCU(05/30/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The KAL Group</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address PO Box 984		Amount of Each Disbursement this Period 976.32
City Willows	State CA	
Zip Code 95988	Purpose of Disbursement Bookkeeping	<b>Transaction ID : B-E-431</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lindsy Cosyns</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 1458 E Estancia Drive		Amount of Each Disbursement this Period 550.87
City Merced	State CA	
Zip Code 95340-9181	Purpose of Disbursement Administrative/Salary/Overhead: Payroll	<b>Transaction ID : B-E-432</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1527.19
<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 14 OF 18	
	<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)  
**Steve Crass for Congress**

Full Name (Last, First, Middle Initial) <b>A. CompleteCampaigns.com</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 12 <b>Transaction ID : B-E-434</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Credit Card Processing Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lindsi Cosyns</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 1458 E Estancia Drive		Amount of Each Disbursement this Period 289.52 <b>Transaction ID : B-E-437</b>
City Merced State CA Zip Code 95340-9181	Purpose of Disbursement Administrative/Salary/Overhead: Payroll 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	301.52
<b>TOTAL</b> This Period (last page this line number only).....	60721.23

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

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

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NAME OF COMMITTEE (In Full)  
**Steve Crass for Congress**

Full Name (Last, First, Middle Initial) <b>A. Arthur Nutcher</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 3330 McKee Road		Amount of Each Disbursement this Period 1100 <b>Transaction ID : B-E-441</b>
City Merced	State CA	
Zip Code 95340-1736	Purpose of Disbursement Refund General Contribution	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Robert R Nutcher</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 2039 Palm Drive		Amount of Each Disbursement this Period 2600 <b>Transaction ID : B-E-442</b>
City Hermosa Beach	State CA	
Zip Code 90254-2868	Purpose of Disbursement General Contribution Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
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	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3700.00
<b>TOTAL</b> This Period (last page this line number only).....	3700.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 18
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Steve Crass for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CompleteCampaigns.com</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Software
Mailing Address 205 Pennsylvania Avenue SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period <input type="text" value="2475"/>	<b>Transaction ID : SD10-DEBT156</b>	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="2475"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The KAL Group</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Bookkeeping
Mailing Address PO Box 984	
City State Zip Code Willows CA 95988	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	<b>Transaction ID : SD10-DEBT438</b>	
Amount Incurred This Period <input type="text" value="750"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="750"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Fergus &amp; Company LLP</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Payroll Service
Mailing Address 567 E 5th Avenue	
City State Zip Code Chico CA 95926-2601	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	<b>Transaction ID : SD10-DEBT436</b>	
Amount Incurred This Period <input type="text" value="420"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="420"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="3645.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>



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

NAME OF COMMITTEE (In Full)  
**Steve Crass for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>United States Treasury</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Payroll Taxes
Mailing Address 1500 Pennsylvania Avenue NW	
City State Zip Code Washington DC 20229-0003	

Outstanding Balance Beginning This Period 450.14	<b>Transaction ID : SD10-DEBT429</b>	
Amount Incurred This Period 677.27	Payment This Period 0	Outstanding Balance at Close of This Period 1127.41

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Employment Development Department</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Payroll Taxes
Mailing Address PO Box 826276	
City State Zip Code Sacramento CA 94230-6276	

Outstanding Balance Beginning This Period 0	<b>Transaction ID : SD10-DEBT430</b>	
Amount Incurred This Period 9.32	Payment This Period 0	Outstanding Balance at Close of This Period 9.32

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Orman Communications</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Data Lists and Maps
Mailing Address 3589 W Buena Vista Avenue	
City State Zip Code Fresno CA 93711-0107	

Outstanding Balance Beginning This Period 403.96	<b>Transaction ID : SD10-DEBT392</b>	
Amount Incurred This Period 0	Payment This Period 403.96	Outstanding Balance at Close of This Period 0

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	1136.73
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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)	PAGE 18 OF 18
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Steve Crass for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Visa - MSEFCU</b>	Nature of Debt (Purpose): Advertising: Radio Advertising
Mailing Address PO Box 1151	
City State Zip Code Merced CA 95341-1151	

Outstanding Balance Beginning This Period 0	<b>Transaction ID : SD10-DEBT422</b>	
Amount Incurred This Period 756.1	Payment This Period 0	Outstanding Balance at Close of This Period 756.1

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Orman Communications</b>	Nature of Debt (Purpose): Advertising: Data and Audio Recording
Mailing Address 3589 W Buena Vista Avenue	
City State Zip Code Fresno CA 93711-0107	

Outstanding Balance Beginning This Period 0	<b>Transaction ID : SD10-DEBT444</b>	
Amount Incurred This Period 1746.18	Payment This Period 0	Outstanding Balance at Close of This Period 1746.18

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Hashtag Marketing</b>	Nature of Debt (Purpose): Advertising: Website Marketing
Mailing Address 3108 Hoyt Place	
City State Zip Code Tulare CA 93274-7763	

Outstanding Balance Beginning This Period 0	<b>Transaction ID : SD10-DEBT443</b>	
Amount Incurred This Period 105.83	Payment This Period 0	Outstanding Balance at Close of This Period 105.83

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	2608.11
2) <b>TOTALS</b> This Period (last page this line number only) .....	7389.84
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	7389.84