

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

FRANK F BLAS JR FOR CONGRESS

ADDRESS (number and street) ▼

P O BOX 74

Check if different than previously reported. (ACC)

HAGATNA

GU

96932

2. FEC IDENTIFICATION NUMBER ▼

C C00514612

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

GU

00

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 / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ / through / /

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 Ms Mary Fejeran

Signature of Treasurer Ms Mary Fejeran

[Electronically Filed]

Date

/ /

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									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
FRANK F BLAS JR 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))....	16763.00	16763.00
(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)).....	16763.00	16763.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	21216.81	21216.81
(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)).....	21216.81	21216.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5071.07	
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).....	0.00	

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

FRANK F BLAS JR 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).....	9540.00	9540.00
(ii) Unitemized.....	7223.00	7223.00
(iii) TOTAL of contributions from individuals ▶	16763.00	16763.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	16763.00	16763.00
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.)	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)..... ▶	16763.00	16763.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	21216.81	21216.81
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) ▶	21216.81	21216.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	9524.88
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	16763.00
25. SUBTOTAL (add Line 23 and Line 24).....	26287.88
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	21216.81
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5071.07

**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 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

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

Mailing Address P O Box 12195

City State Zip Code
Tamuning GU 96931

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

Name of Employer Occupation
Government of Guam Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : SA11AI.4419

Amount of Each Receipt this Period
500.00

Donation

B. Full Name (Last, First, Middle Initial)
Marie Benito

Mailing Address 0116 Chalan Santo Papa

City State Zip Code
Hagatna GU 96910

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

Name of Employer Occupation
Government of Guam Teacher

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : SA11AI.4415

Amount of Each Receipt this Period
500.00

Donation

C. Full Name (Last, First, Middle Initial)
Michael Benito

Mailing Address 116 Chalan Santo Papa

City State Zip Code
Hagatna GU 96910

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

Name of Employer Occupation
Payless Supermarkets Management

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : SA11AI.4376

Amount of Each Receipt this Period
500.00

Donation

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Vicente Blas

Mailing Address P O Box 5341

City Hagatna State GU Zip Code 96932

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4403

Amount of Each Receipt this Period
 500.00

Donation

B. Full Name (Last, First, Middle Initial)
Paul M. Calvo

Mailing Address 138 Martyr Street

City Hagatna State GU Zip Code 96910

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

Name of Employer Calvos Enterprise Occupation Management

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4410

Amount of Each Receipt this Period
 250.00

Donation

C. Full Name (Last, First, Middle Initial)
Rosie B. Calvo

Mailing Address 138 Martyr Street

City Hagatna State GU Zip Code 96910

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

Name of Employer Housewife Occupation Housewife

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4412

Amount of Each Receipt this Period
 250.00

Donation

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Anthony Camacho

Mailing Address 165 Marata Street

City State Zip Code
Tamuning GU 96913

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : SA11AI.4405

Amount of Each Receipt this Period
250.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. Frank Campillo

Mailing Address 1270 N Marine Dr. Suite 101, PMB 5

City State Zip Code
Tamuning GU 96913

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

Name of Employer Occupation
Calvos Insurance Underwriters Health Plan Adminstator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : SA11AI.4374

Amount of Each Receipt this Period
250.00

Donation

C. Full Name (Last, First, Middle Initial)
Monito Co

Mailing Address P O Box 10224

City State Zip Code
Tamuning GU 96931

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

Name of Employer Occupation
Benson's Hardware Management

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : SA11AI.4382

Amount of Each Receipt this Period
250.00

Donation

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

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

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 8 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Cruz

Mailing Address P O Box 2269

City Hagatna State GU Zip Code 96932

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

Name of Employer Self Employed Occupation Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4402

Amount of Each Receipt this Period
 1000.00

Donation

B. Full Name (Last, First, Middle Initial)
Ely Del Carmen

Mailing Address P O Box 2767

City Hagatna State GU Zip Code 96932

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

Name of Employer Inland Builders Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4396

Amount of Each Receipt this Period
 250.00

Donation

C. Full Name (Last, First, Middle Initial)
Mr. Phillip J Flores

Mailing Address P O Box 2888

City Hagatna State GU Zip Code 96932

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

Name of Employer BankPacific Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4373

Amount of Each Receipt this Period
 500.00

Donation

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Fred Horecky

Mailing Address P O Box 4112

City Hagatna State GU Zip Code 96932

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4371

Amount of Each Receipt this Period
 250.00

Donation

B. Full Name (Last, First, Middle Initial)
John Ko

Mailing Address P O Box 9796

City Tamuning State GU Zip Code 96931

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

Name of Employer Net Tours Occupation Management

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4400

Amount of Each Receipt this Period
 250.00

Donation

C. Full Name (Last, First, Middle Initial)
Oscar Miyashita

Mailing Address 231 Ypao Road

City Tamuning State GU Zip Code 96913

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

Name of Employer Retired Occupation CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2012

Transaction ID : SA11AI.4343

Amount of Each Receipt this Period
 250.00

Donation

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

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

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 10 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
William Nault

Mailing Address 200 Chichirica Street

City State Zip Code
Tamuning GU 96913

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

Name of Employer Occupation
R & C Tours Management

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4398

Amount of Each Receipt this Period
 250.00

Donation

B. Full Name (Last, First, Middle Initial)
Timothy Ogata

Mailing Address P O Box 6578

City State Zip Code
Tamuning GU 96931

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

Name of Employer Occupation
TakeCare Insurance Management

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4384

Amount of Each Receipt this Period
 250.00

Donation

C. Full Name (Last, First, Middle Initial)
Michael Pangelinan

Mailing Address 259 Martyr Street

City State Zip Code
Hagatna GU 96910

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4367

Amount of Each Receipt this Period
 250.00

Donation

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

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

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 11 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Simon Sanchez

Mailing Address 109 Palting Way

City State Zip Code
Tamuning GU 96913

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

Name of Employer Occupation
Global Laundry CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : SA11AI.4409

Amount of Each Receipt this Period
250.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. Frank R Santos

Mailing Address P O Box 9362

City State Zip Code
Hagatna GU 96932

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

Name of Employer Occupation
Self Employed Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : SA11AI.4414

Amount of Each Receipt this Period
250.00

Donation

C. Full Name (Last, First, Middle Initial)
Charlie Tai

Mailing Address 482 Pale San Vitores

City State Zip Code
Tumon GU 96913

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

Name of Employer Occupation
Dollar Rent A Car President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : SA11AI.4417

Amount of Each Receipt this Period
500.00

Donation

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joyce Tang

Mailing Address 330 Hernan Cortez

City Hagatna State GU Zip Code 96910

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4369

Amount of Each Receipt this Period
250.00

Donation

B. Full Name (Last, First, Middle Initial)
Craig Thompson

Mailing Address 268 Bejong Street

City Barrigada State GU Zip Code 96913

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

Name of Employer MCV Occupation Management

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4375

Amount of Each Receipt this Period
250.00

Donation

C. Full Name (Last, First, Middle Initial)
Carlyn Torres

Mailing Address 238 Archbishop Flores Street
No 300

City Hagatna State GU Zip Code 96910

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

Name of Employer Lujan Aguigui & Perez Occupation Legal Secretary

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4390

Amount of Each Receipt this Period
500.00

Donation

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joseph Torres

Mailing Address 238 Archbishop Flores
No 300

City Hagatna State GU Zip Code 96910

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4388

Amount of Each Receipt this Period
250.00

Donation

B. Full Name (Last, First, Middle Initial)
Julie Torres

Mailing Address 238 Archbishop Flores St
No 300

City Hagatna State GU Zip Code 96910

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4386

Amount of Each Receipt this Period
250.00

Donation

C. Full Name (Last, First, Middle Initial)
Richard Untalan

Mailing Address 562 Harmon Loop Road

City Dededo State GU Zip Code 96929

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

Name of Employer UMC Holdings, Inc. Occupation Management

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.4380

Amount of Each Receipt this Period
250.00

Donation

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

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

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 14 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

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

Mailing Address 562 Harmon Loop Road

City State Zip Code
Dededo GU 96929

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

Name of Employer Occupation
UMC Holdings, Inc. Management

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
290.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : SA11AI.4424

Amount of Each Receipt this Period
40.00

Donation

B. Full Name (Last, First, Middle Initial)
Louie Yanza

Mailing Address P O Box 2981

City State Zip Code
Hagatna GU 96932

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : SA11AI.4407

Amount of Each Receipt this Period
250.00

Donation

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).....

290.00

9540.00

**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 15 OF 23		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bensons Hardware		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2012
Mailing Address P O Box 6157		Amount of Each Disbursement this Period 670.00
City Tamuning	State GU	
Purpose of Disbursement Lumber & Materials purchased for signs	Category/ Type 006	
Candidate Name		Transaction ID : SB17.4440
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bensons Hardware		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2012
Mailing Address P O Box 6157		Amount of Each Disbursement this Period 806.50
City Tamuning	State GU	
Purpose of Disbursement Lumber purchase for signs	Category/ Type 006	
Candidate Name		Transaction ID : SB17.4489
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Benz Signs & Supplies		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address P O Box 6128		Amount of Each Disbursement this Period 205.31
City Tamuning	State GU	
Purpose of Disbursement Purchase Chloroplast to make signs	Category/ Type 006	
Candidate Name		Transaction ID : SB17.4452
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1681.81
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 16 OF 23			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Benz Signs & Supplies			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012		
Mailing Address P O Box 6128			Amount of Each Disbursement this Period 812.50		
City Tamuning	State GU	Zip Code 96931	Transaction ID : SB17.4454		
Purpose of Disbursement Purchase Magnetic Roll to make bumper stickers		Category/ Type 006			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Department of Public Works			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012		
Mailing Address 542 N Marine drive			Amount of Each Disbursement this Period 300.00		
City Upper Tumon	State GU	Zip Code 96913	Transaction ID : SB17.4479		
Purpose of Disbursement Purchased Permitting fee		Category/ Type 007			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Expressions Studio			Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012		
Mailing Address P O Box 5692			Amount of Each Disbursement this Period 337.50		
City Hagatna	State GU	Zip Code 96932	Transaction ID : SB17.4466		
Purpose of Disbursement Invoice 449 - Photography services		Category/ Type 007			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	812.50
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 17 OF 23		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms Mary Fejeran		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address P O Box 621		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4433
City Hagatna State GU Zip Code 96932	Purpose of Disbursement Reimbursement for Generator Rental Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ms Mary Fejeran		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address P O Box 621		Amount of Each Disbursement this Period 368.03 Transaction ID : SB17.4521
City Hagatna State GU Zip Code 96932	Purpose of Disbursement staff reimbursement - see below Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ms Mary Fejeran		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address P O Box 621		Amount of Each Disbursement this Period 3050.00 Transaction ID : SB17.4481
City Hagatna State GU Zip Code 96932	Purpose of Disbursement Reimburse for Samurai Expenses 05.30.12 Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3818.03
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 18 OF 23			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Victor Gaza		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2012
Mailing Address 1270 North Marine Drive PMB 101-385		Amount of Each Disbursement this Period 3710.00
City Tamuning	State GU Zip Code 96931	
Purpose of Disbursement Campaign Banners Purchased	Category/Type 006	Transaction ID : SB17.4485
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Victor Gaza		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 1270 North Marine Drive PMB 101-385		Amount of Each Disbursement this Period 165.00
City Tamuning	State GU Zip Code 96931	
Purpose of Disbursement Campaign Banners purchased	Category/Type 006	Transaction ID : SB17.4491
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Guam Copy print Sign Stamp Corp		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address P O Box 4283		Amount of Each Disbursement this Period 325.10
City Hagatna	State GU Zip Code 96932	
Purpose of Disbursement Invoice 1784 - Purchased 500 pcs. of Bumper Stickers	Category/Type 006	Transaction ID : SB17.4463
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4200.10
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 19 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Guam Copy Print Sign Stamp Corp.			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012	
Mailing Address P O Box 4283			Amount of Each Disbursement this Period 500.00	
City Hagatna	State GU	Zip Code 96932	Transaction ID : SB17.4441	
Purpose of Disbursement Purchased Bumper Stickers		Category/ Type 006		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. Guam Copy Print Sign Stamp Corp.			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012	
Mailing Address P O Box 4283			Amount of Each Disbursement this Period 720.00	
City Hagatna	State GU	Zip Code 96932	Transaction ID : SB17.4444	
Purpose of Disbursement Purchase Lollipop signs - 200 pcs		Category/ Type 006		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. Guam Ukelele Club			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012	
Mailing Address P O Box 8581			Amount of Each Disbursement this Period 250.00	
City Tamuning	State GU	Zip Code 96913	Transaction ID : SB17.4450	
Purpose of Disbursement Donation to Ukelele Club		Category/ Type 012		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1470.00
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 20 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mabuhay News		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address P O Box 5993		Amount of Each Disbursement this Period 542.00 Transaction ID : SB17.4470
City Hagatna State GU Zip Code 96932	Purpose of Disbursement Purchased ad for Philippine Independence Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Pacific Daily News		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address P O Box DN		Amount of Each Disbursement this Period 588.75 Transaction ID : SB17.4442
City Hagatna State GU Zip Code 96932	Purpose of Disbursement Purchased Ad for 5.15.12 fundraising event Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Pacific Daily News		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address P O Box DN		Amount of Each Disbursement this Period 942.00 Transaction ID : SB17.4472
City Hagatna State GU Zip Code 96932	Purpose of Disbursement Purchase Ad for 5.28.12 run for Memorial Day Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2072.75
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 21 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Pacific Daily News		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address P O Box DN		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4492
City Hagatna State GU Zip Code 96932	Purpose of Disbursement Purchase Ad - Wraps for Restaurants and Banks Category/Type 004	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Republican Party of Guam		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address P O Box 2846		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4435
City Hagatna State GU Zip Code 96932	Purpose of Disbursement Purchase GOP Lincoln Dinner Tickets Category/Type 012	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Samurai Guam LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address P O Box 4338		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4468
City Hagatna State GU Zip Code 96932	Purpose of Disbursement Deposit for 05/30/12 fundraising event - Venue Category/Type 007	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3250.00
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 22 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tsang Brothers Corp.		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2012
Mailing Address P O Box 10198		Amount of Each Disbursement this Period 2676.50
City Tamuning	State GU	
Zip Code 96931	Purpose of Disbursement Lumber purchase for signs	Transaction ID : SB17.4487
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tsang Brothers Corporation		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012
Mailing Address P O Box 10198		Amount of Each Disbursement this Period 225.02
City Tamuning	State GU	
Zip Code 96931	Purpose of Disbursement Purchased Materials for signs	Transaction ID : SB17.4437
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input 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	
Candidate Name	Category/ Type	
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).....	2901.52
TOTAL This Period (last page this line number only).....	20206.71

**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 23 OF 23	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRANK F BLAS JR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Legislative Employees Association		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address 155 Hesler Place		Amount of Each Disbursement this Period 41.29
City Hagatna	State GU Zip Code 96910	
Purpose of Disbursement In kind contribution -see reimbursement to Mary Fejeran on 05/29/12 - <i>Subway for relay 4 life</i>		Transaction ID : SB21.4532
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) 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)	Category/Type
State: District:	Category/Type	

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)	Category/Type
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	0.00