M 1203082412

REPORT OF RECEIPTS

RECEIVED

FEC FORM 3

(Revised 02/2003)

FORM 3 AND DISBURSEMENTS For An Authorized Committee				IN 25 PM I2: 26	
1. NAME OF COMMITTEE (in	TYPE OR PRIN		ample: If typing, type er the lines.	12FE4M5	SECOND CONTRACTOR
ADDRESS (number and than previous reported. (A	ferent LIFSOF			CA 92 STATE AMENDED (A)	ZIP CODE A STATE V DISTRICT
(a) Quarterly Ro April 15 July 15 October January	PORT (Choose One) eports: Guarterly Report (Q1) Quarterly Report (Q2) r 15 Quarterly Report (Q3) r 31 Year-End Report (YE)	Election on	Election Report for the Primary (12P) Convention (12C)	e: General (12G) Special (12S)	in the State of Special (30S) in the State of
Type or Print Name of Signature of Treasure		Temsen	_	Date Date	nplete.

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Office

Use

Only

SUMMARY PAGE

of Receipts and Disbursements

Page 2

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

COMMITTEE TO ELECT BILL TENSEN TO CONGRESS

Report Covering the Period: From: 0,4 0,1 20,12 To: 0,5 1,6 1,2 2,0 1,2

F	Report	Covering the Period: From:	<u>.4</u> . <u>[0,1]</u>	2.0.1.2 T	o: 0,5 1,6 [2,0,1,2]
	<u></u>			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))		7.050.00	1.7.22.0.9.0
	(b)	Total Contribution Refunds (from Line 20(d))		0.00	
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))		7,050,00	1.7, 2,2,0,9,0
7.	Net	Operating Expenditures			
	(a)	Total Operating Expenditures (from Line 17)		7,2,4,7,8.0	2246.4.96
	(b)	Total Offsets to Operating Expenditures (from Line 14)		0.00	y and the second se
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))		7,2,4,7,8.0	22.4.6.4.96
8.		h on Hand at Close of orting Period (from Line 27)	32	1137.51	
9.	the	ts and Obligations Owed TO Committee (Itemize all on edule C and/or Schedule D)			
10.	the	ts and Obligations Owed BY Committee (Itemize all on edule C and/or Sohedule D)	Tomas Comment Comment	3.81.53	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FEC Form 3 (Revised 12/2003) Write or Type Committee Name

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1203082

DETAILED SUMMARY PAGE

of Receipts

Page 3

COMMITTEE TO ELECT BILL JENSEN TO CONGRESS

8,4 6,1 2,0,1,2 1.6 201 From: Report Covering the Period: **COLUMN A** COLUMN B I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other Than Political Committees 9,0500 (i) Itemized (use Schedule A)...... 0,0,0 (ii) Unitemized..... (iii) TOTAL of contributions 5.0.00 from individuals (b) Political Party Committees..... Other Political Committees (such as PACs) (d) The Candidate TOTAL CONTRIBUTIONS (other than loans) 7.050.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the Candidate..... (b) All Other Loans..... (c) TOTAL LOANS (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0,00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

COLUMN A COLUMN B II. DISBURSEMENTS **Total This Peried Election Cycle-to-Date** 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate..... (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees (b) Political Party Committees..... (c) Other Political Committees (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 8385.31 25. SUBTOTAL (add Line 23 and Line 24)..... 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....

SCHEDULE A (FEC Form 3)		· · · · · · · · · · · · · · · · · · ·	FOR LINE NUMBE (check only one)	R: PAGE OF	
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A	ny information copied from such Reports and r for commercial purposes, other than using the	Statements m	ay not be sold or used by any postderess of any political committee	erson for the purpos	e of soliciting contributions
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Α.	Full Name (Last, First, Middle Initial) Nauyen Toseph C. Mailing Address 18165 Harbor Ave.	State	Zip Code	Date of Receipt	
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Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a	ay not be sold or used by any address of any political committed	person for the purpose of soliciting contributions see to solicit contributions from such committee.
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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Any information copied from such Reports and Statements m	ay not be sold or used by any	person for the purpose of soliciting contributions
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SCHEDULE B (FEC Form 3)	11	FOR LINE NUMBER: PAGE OF
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Full Name (Last, First, Middle Initial) B. Daily Press Mailing Address 13891 Park Ave.		Date of Disbursement
City Victor ville CA	Zip Code 92392	Amount of Each Disbursement this Period

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Mailing Address Park Ave.	02,101,5015
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City State Zip Code	Amount of Each Disbursement this Period
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Candidate Name Category/ Type	
Office Sought: Disbursement For: Senate Disbursement For: General*	
State: District: Other (specify)	
SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	

SCHEDUL	EΒ	(FEC	Form	3)
ITEMIZED	DISE	BURSI	EMEN.	TS

SCHEDULE B (FEC Form 3)	Line concepts cohectula(s)	FOR LINE NUMBER: PAGE OF
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)
	Detailed Summary Paga	20a 20b 20c 21
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a	ay not be sold or used by any	person for the purpose of soliciting contributions ee to solicit contributions from such committee
NAME OF COMMITTEE (In Full)		A
2 Committee TO E	LECT BILL JE	ENSEN TO Congress
Full Name (Last, First, Middle Initial)		Date of Disbursement
1 Porsus tul	<u>A</u>	May / Gap / Carry
Mailing Address 4987 Main	54.	1021 1771 1967191
City LUDINA Ca-	²⁰ 13345	Amount of Each Disbursement this Period
Purpose of Disbursement (QVE) Cas	1062	25.50
Candidate Name	Category/ Type	5
Office Sought: House Disbursement For:		
Senate Primary President Other (sp	General Decify)	··
State: District:		
Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Wills forso		DE POPULATA
Mailing Address 15348 Rou Ro	sors P Kwil	
City Ca State	72392	Amount of Each Disbursement this Period
Purpose of Disbursement	Chard Dail	3500
Candidate Name	Category/	
Office Sought: House Disbursement For:	Un Type	_
Senate Primary	° General	
President Other (sp. State: District:	еспу)	·
Full Name (Last, First, Middle Initial)		Date of Disbursement
3. Wills forso		Date of Disbursement
Mailing Address 368 Rou Rock	& PKW4	109/119/2012
city Victorials. Can State State	212	Amount of Each Disbursement this Period
Purpose of Dieburgement	ansel 1550	35.60
Candidate Name RIM ANGER	Category/ Type	
Office Sought: House Disbursement For:	i iybe	-
Senate X Primary President Other (spi	General*	
State: District:		
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TOTAL This Period (last page this line number only)		

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one) 17 18 19a 19b 20a 20b 20c 21
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (IN FUIL)	IECT BIII JE	INSENTO CONQUESS
Full Name (uast First, Middle Initial)	icer bill je	Date of Disbursement
A. Horsus Full	<u></u>	155 174 12575
Mailing Address 987 Mun State	Sip Code	
Purpose of Disbursement	92345	Amount of Each Disbursement this Period
Candidate Name	0.02	
Office Sought: House Disbursement For:	unsun Category/ Type	<u>.</u>
Senate Other (sp	General	
State: District: Full Name (Last, First, Middle Initial)		
B. The Deat 5		Date of Disbursement
Mailing Address 12187 Main	A	
City HISONIA CO State	93345	Amount of Each Disbursement this Period
Purpose of Disburgement (Vel),	602	20.61
Candidate Name BUL Tun	Sen Category/ Type	
Office Sought:	General	
State: President Other (sp	ecify)	
Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address 0 0	0 DV	05/15/2013
CALLONING CALLO SZIP	18 PKWY	Amount of Each Disbursement this Period
Purpose of Diebursement	NVI KOTI	100
Candidate Name	Category/	
Office Sought: House Disbursement For: Senate My Primary	Type Type	
Senate (X) Primary President Other (spe		

State:

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

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

District:

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)
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Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a	ay not be sold or used by any oddress of any political committed	person for the purpose of soliciting contributions see to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·	- A
/ Committee TO E	ECT BIII JE	Ensen to Congress
Full Name (Last, First, Middle Initial)	- 10	Date of Disbursement
* Brad Widdon's	JW	
Mailing Address	<i>O</i>	1021 1121 190151
city addlanto (State)	Zip 89°2 201	Amount of Each Disbursement this Period
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Candidate Name	Category/	
Office Sought: House Disbursement For:	Type	_
Senate Primary Other (sp	General	
President Other (sp. State: District:	ecity)	
Full Name (Last, First, Middle Initial)		,
В.	,	Date of Disbursement
Mailing Address		Mam / Dab / Yarar
Cjty State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Tarposo of Biobardonian		
Candidate Name	Category/ Type	
Office Sought: House Disbursement For:		
Senate Primary President Other (sp	ecify) General	
State: District:		· ·
Full Name (Last, First, Middle Initial)		Date of Disbursement
C. 		M M / D D / Y T X Y Y Y
Mailing Address		
City State Zip	Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Category/	1
Office Sought: House Disbursement For:	Туре	_
Senate Primary	General*	· ·
President Other (spe	ecify)	·
- Control	· · · · · · · · · · · · · · · · · · ·	
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TOTAL This Period (last page this line number only)		724780

SCHEDULE C (FEC Form 3)

PAGE Use separate schedule(s) FOR LINE NUMBER:

OANS	Detailed Summary Page (check only one) 13a
NAME OF COMMITTEE (In Full) COMMITTEE TO FLEC	TBILL JENSEN TO CONGRESS
JENSEN, WILLIAM, C Mailing Address	Election:
City HESPERIA CA	ZIP Code 92340
9	by Payment To Date Balance Outstanding at Close of This Period 3.6.1.57
Date Incurred Mam / Dad / Yayayayayaya	Date Due Interest Rate Secured: Date Due (apr) Yes No
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Co	de Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Co	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Co	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Co	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only)	

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page _____ of Schedule C

Federal Election Commission, Washington, D.C. 20463		<u> </u>
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
		C
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
Full Name		
	The same and the same of the s	
Mailing Address	Date Incurred or Established	Man , oro , vvvvv
City State Zip Code	Date Due	M M / D V D / V V V V V V V V V V V V V V V
A. Has loan been restructured? No Yes	If yes, date originally incurred	M M / 000 / V
B. If line of credit,	Total Outstanding	
Amount of this Draw:	Deleven	
C. Are other parties secondarily liable for the debt incu	urred?	
No Yes (Endorsers and guarantors n	nust be reported on Schedule C.)	
 D. Are any of the following pledged as collateral for the property, goods, nagotiable instruments, certificates 	o louis Tous coluin, porcostus	Vhat is the value of this collateral?
stocks, accounts receivable, cash on deposit, or oth	į į	
No Yes If yes, specify:		Does the lender have a perfected security
		nterest in it? No Yes
E. Are any future contributions or tuture receipts of interest collateral for the loan? No Yes If yes,	specify:	What is the estimated value?
	Location of account:	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).		
Date account established:	Address:	
M M / O O / Y Y Y	City, State, Zip:	
F. If neither or the types of collateral described above		
exceed the loan amount, state the basis upon which	n this loan was made and the basi	s on which it assures repayment.
G. COMMITTEE TREASURER		DATE
Typed Name Signature		MEM / DOO / YVYYYY
H. Attach a signed copy of the loan agreement.		
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the	terms of the loan and other inform	nation regarding the extension of the loan
are accurate as stated above. II. The loan was made on terms and conditions (i	including interest rate) no more fav	orable at the time than those imposed for
similar extensions of credit to other borrowers III. This institution is aware of the requirement tha complied with the requirements set forth at 11	of comparable credit worthiness. t a loan must be made on a basis	which assures repayment, and has
AUTHORIZED REPRESENTATIVE	C. T. TOUISE WIN TOUTTE III HIGHI	DATE
Typed Name		Man / Date / Valval
Signature	îtle	

SCHED	ULE	D	(FEC	Form	3)
DEBTS	AND	0	BLIGA	TIONS	5

(Use separate

PAGE OF

EBTS AND OBLIGATIONS		for each	schedule(s) FOR LINE NUMBER: (check only one)	
xcluding Loans NAME OF COMMITTEE (In Full)		Harrisores III	19/	10
A. Full Name (Last, First, Middle Initial) of Do	ebtor or Creditor	Nature	of Debt (Purpos	se):
Mailing Address		·		
City State	Zip Code			
Outstanding Balance Beginning This Period Amount Incurred This Period B. Full Name (Last, First, Middle Initial) of De	Payment This Period		mr.fl.ma.f.rencf.r.mfl.	at Close of This Period
Mailing Address				·-r
City State	Zip Code			
Outstanding Balance Beginning This Period Amount Incurred This Period C. Full Name (Last, First, Middle Initial) of De	Payment This Period			at Close of This Period
Mailing Address				
City	State Zip Code			
Outstanding Balance Beginning This Period Amount Incurred This Period	Payment This Period			at Close of This Period
SUBTOTALS This Period This Page (optional)	•		
t) TOTALS This Period (last page this line num	ber only)		and make a second	
) TOTAL OUTSTANDING LOANS from Schedu	ule C (last page only)			
ADD 2) and 3) and carry forward to appropri	iate line of Summary Page (last page on	ly) ▶		<u> </u>

Federal Election Com- ENVELOPE REPLACEMENT PAGE FOR The FEC added this page to the end of this filing	INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Sign	ature Confirmation™ Label
USPS Express Mail	Postmarked 6/23/12
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	lext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
h	6/25/12
DREDARER	DATE DDEDADED

(3/2005)