

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

Carr for Congress

ADDRESS (number and street)

525 E. Seaside Way, #101-C

Check if different than previously reported. (ACC)

Long Beach

CA

90802

2. FEC IDENTIFICATION NUMBER ▼

C C00556670

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

33

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

06

03

2014

in the State of

CA

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

04

01

2014

through

05

14

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 Gary Crummitt

Signature of Treasurer Gary Crummitt

[Electronically Filed]

Date

05

22

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.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Carr 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))....	60822.00	389446.31
(b) Total Contribution Refunds (from Line 20(d))	2600.00	2600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	58222.00	386846.31
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	327194.54	399994.24
(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)).....	327194.54	399994.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	19939.73	
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).....	65819.68	

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

Carr 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).....	54320.00	363205.00
(ii) Unitemized.....	6452.00	21191.31
(iii) TOTAL of contributions from individuals ▶	60772.00	384396.31
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	50.00	5050.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	60822.00	389446.31
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	30000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	30000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	4337.66	4337.66
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	65159.66	423783.97

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	327194.54	399994.24
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	2600.00	2600.00
(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)).....	2600.00	2600.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	329794.54	402594.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	284574.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	65159.66
25. SUBTOTAL (add Line 23 and Line 24).....	349734.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	329794.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	19939.73

**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 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Kenneth Abrmowit

Mailing Address P.O.Box 958

City Southport State CT Zip Code 06890

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

Name of Employer NGN Capital Occupation Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 01 / 2014

Transaction ID : INCA362

Amount of Each Receipt this Period
 1500.00

1500.00

B. Full Name (Last, First, Middle Initial)
Elaine Albert

Mailing Address 120 Greenfield Ave.

City Los Angeles State CA Zip Code 90049

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 01 / 2014

Transaction ID : INCA358

Amount of Each Receipt this Period
 500.00

500.00

C. Full Name (Last, First, Middle Initial)
Judith Angerman

Mailing Address 356 N. McCadden Pl.

City Los Angeles State CA Zip Code 90004

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA672

Amount of Each Receipt this Period
 1000.00

1000.00

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

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

3000.00

**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 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Lily Artenstein

Mailing Address 1520 Sunset Plaza Dr.

City Los Angeles State CA Zip Code 90069

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1860.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : INCA668

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Kathryn Axelrod

Mailing Address 3315 S. Bentley Ave.

City Los Angeles State CA Zip Code 90034

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

Name of Employer Absolute Configuration Inc. Occupation Writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 09 / 2014

Transaction ID : INCA378

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Thomas K. Barad

Mailing Address 9336 W. Washington Blvd. Building

City Culver City State CA Zip Code 90232

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

Name of Employer BEI Occupation Film Producer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : INCA671

Amount of Each Receipt this Period
1500.00

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

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

2500.00

**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 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Kamran Benji

Mailing Address 506 S. Gretna Green Way

City Los Angeles State CA Zip Code 90049

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : INCA647

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Stanley Black

Mailing Address 433 N. Camden Dr. Unit 1070

City Beverly Hills State CA Zip Code 90210

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

Name of Employer Occupation
 Black Equities Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 07 / 2014

Transaction ID : INCA433

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Noah A. Blumofe

Mailing Address 1717 South Crest Dr.

City Los Angeles State CA Zip Code 90035

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

Name of Employer Occupation
 Health Care Partners Medical Group Podiatrist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : INCA628

Amount of Each Receipt this Period
 500.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Derek Brown

Mailing Address 5265 Genesta Ave.

City Encino State CA Zip Code 91316

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 09 / 2014

Transaction ID : INCA441

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Giveon Brunn

Mailing Address 615 W. Rodeo Dr.

City Beverly Hills State CA Zip Code 90210

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

Name of Employer Automatic Filters, Inc. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 09 / 2014

Transaction ID : INCA648

Amount of Each Receipt this Period
 360.00

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

Mailing Address 9260 Monte Mar Dr.

City Los Angeles State CA Zip Code 90035

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

Name of Employer Conrad N. Hilton Foundation Occupation Investment Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 09 / 2014

Transaction ID : INCA440

Amount of Each Receipt this Period
 500.00

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

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

1360.00

**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 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Victor Chaltiel

Mailing Address 908 Trophy Hills Dr.

City Las Vegas State NV Zip Code 89134

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

Name of Employer Redhills Ventures, LLC Occupation Founder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 01 / 2014

Transaction ID : INCA363

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Howard S. Cohen

Mailing Address 6200 LBJ Freeway

City Dallas State TX Zip Code 75240

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

Name of Employer Waldman Brothers Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 12 / 2014

Transaction ID : INCA641

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Tamir Cohen

Mailing Address 2035 Harding St. Ste. 200

City Hollywood State FL Zip Code 33020

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

Name of Employer Tamir Cohen Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 01 / 2014

Transaction ID : INCA360

Amount of Each Receipt this Period
 1000.00

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

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

3850.00

**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 61
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Marc Cooper		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 1256 Broadway		Transaction ID : INCA680
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Prudential Capital Group	Occupation Investment Analyst	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Judith A. Eber		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 11773 Chenault St.		Transaction ID : INCA663
City Los Angeles	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00	

Full Name (Last, First, Middle Initial) C. st Feder		Date of Receipt M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 2420 Duxbury Pl.		Transaction ID : INCA499
City Los Angeles	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Esther Feder	Occupation Health Management	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**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 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Lorin M. Fife

Mailing Address 5003 Bellaire Ave.

City Valley Village State CA Zip Code 91607

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

Name of Employer Lorin Fife Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : INCA568

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Stephen Fiske

Mailing Address 6100 Hollywood Blvd. Unit 305

City Hollywood State FL Zip Code 33024

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

Name of Employer XCity First Mortgage Occupation Mortgage Banking

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : INCA549

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Robert T. Flesh

Mailing Address 1121 E. Philadelphia

City Ontario State CA Zip Code 91761

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

Name of Employer Community Asset Management Occupation Business Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : INCA500

Amount of Each Receipt this Period
 1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Carr for Congress

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

Mailing Address 1450 Crystal lake Rd.

City Aspen State CO Zip Code 81611

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

Name of Employer Aspen Club International Occupation Entrepreneur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 08 / 2014

Transaction ID : INCA375

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mac Goldman

Mailing Address 1500 S. Ocean Blvd.

City Boc Raton State FL Zip Code 33432

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : INCA667

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Daniel M. Gottlieb

Mailing Address 439 N.Befford Dr.

City Beverly Hills State CA Zip Code 90210

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

Name of Employer G&L Realty Corp., LLC Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 17 / 2014

Transaction ID : INCA517

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Kohen Haim

Mailing Address 806 N. Cresent

City State Zip Code
Beverly Hills CA 90210

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

Name of Employer Occupation
Kohen Haim Businessman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : INCA669

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Zalman Harari

Mailing Address 300 N. Swall Dr. Unit 302

City State Zip Code
Beverly Hills CA 90211

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : INCA498

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Eva Heifetz

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : INCA653

Amount of Each Receipt this Period
 250.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
David Horwatt

Mailing Address 10668 Eastborne Ave. Unit 207

City Los Angeles State CA Zip Code 90024

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

Name of Employer General Networks Corp. Occupation Business Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : INCA670

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
David Justman

Mailing Address 5835 Greenbrier Ct.

City Agoura Hills State CA Zip Code 91301

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

Name of Employer JP Morgan Occupation Investments

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : INCA547

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Aldo Laghi

Mailing Address 2895 42nd Ave North

City St. Petersburg State FL Zip Code 33714

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

Name of Employer Alps South LLC Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : INCA539

Amount of Each Receipt this Period
 500.00

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: PAGE 15 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Max Leeds

Mailing Address 962 Hilgard Ave. Unit 303

City Los Angeles State CA Zip Code 90024

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : INCA503

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Zipora Legmann

Mailing Address 12841 Sunset Blvd.

City Los Angeles State CA Zip Code 90049

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : INCA565

Amount of Each Receipt this Period
 400.00

C. Full Name (Last, First, Middle Initial)
Mauricio Levine

Mailing Address 1467 Country Vista Lane

City Bonita State CA Zip Code 91902

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

Name of Employer Occupation
 Mauricio Levine Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 01 / 2014

Transaction ID : INCA354

Amount of Each Receipt this Period
 500.00

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

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

3500.00

**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 16 OF 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Howard Levkowitz

Mailing Address 2951 28th St. Ste. 1000

City Santa Monica State CA Zip Code 90402

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

Name of Employer Tennenbaum Capital Partners, LLC Occupation Investment Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 15 / 2014

Transaction ID : INCA505

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 2444 Wilshire Blvd. Ste. 200

City Santa Monica State CA Zip Code 90403

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 07 / 2014

Transaction ID : INCA430

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Noam Lotan

Mailing Address 22111 Village 22

City Camarillo State CA Zip Code 93012

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : INCA607

Amount of Each Receipt this Period
 500.00

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

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

2500.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Philip Meltzer

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
04 / 07 / 2014

Transaction ID : INCA431

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Michael Messinger

Mailing Address 1117 S. Robertson Blvd.

City State Zip Code
 Los Angeles CA 90035

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

Name of Employer Occupation
 Redwood Investment Management LLC Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
04 / 09 / 2014

Transaction ID : INCA442

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
G.J. Mihlsren

Mailing Address 2208 Walnut Ave.

City State Zip Code
 Manhattan Beach CA 90266

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

Name of Employer Occupation
 Latham & Watkins LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
04 / 26 / 2014

Transaction ID : INCA545

Amount of Each Receipt this Period
 2600.00

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

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

4100.00

**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 18 OF 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Todd M. Morgan

Mailing Address 10800 Wilshire Blvd. Unit 1501

City Los Angeles State CA Zip Code 90024

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

Name of Employer Bel Air Investment Advisors Occupation Executive Managing Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : INCA613

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Steve Oren

Mailing Address 235 S. Tower Dr. Unit 204

City Beverly Hills State CA Zip Code 90211

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

Name of Employer Steve oren Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 09 / 2014

Transaction ID : INCA652

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Gerald Ostrov

Mailing Address 41 Waterview

City Long Branch State NJ Zip Code 07740

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 19 / 2014

Transaction ID : INCA522

Amount of Each Receipt this Period
1000.00

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 19 OF 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Andrew Palmer

Mailing Address 1999 Avenue of the Stars, #2800

City Los Angeles State CA Zip Code 90067

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

Name of Employer Bel Air Investments Advisors Occupation Senior Managing Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : INCA525

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dup Peirce

Mailing Address 222 North Canon Dr. Ste. 203

City Beverly Hills State CA Zip Code 90210

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

Name of Employer Canon Escrow, Inc. Occupation Small Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : INCA502

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Yoav Peled

Mailing Address 9401 Wilshire Blvd. Ste. 600

City Beverly Hills State CA Zip Code 90212

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

Name of Employer IDB Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : INCA560

Amount of Each Receipt this Period
250.00

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 20 OF 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Chaim Pelleg

Mailing Address 166 North Arnaz Dr.

City State Zip Code
Beverly Hills CA 90211

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

Name of Employer Occupation
Chaim Pelleg Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : INCA603

Amount of Each Receipt this Period
 360.00

B. Full Name (Last, First, Middle Initial)
Joseph Perricone

Mailing Address 18 Old Course Dr.

City State Zip Code
Newport Beach CA 92660

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

Name of Employer Occupation
Perricone Juices Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA531

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Lawrence Post

Mailing Address 1160 Tower Rd.

City State Zip Code
Beverly Hills CA 90210

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

Name of Employer Occupation
Arena Capital Investment Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 08 / 2014

Transaction ID : INCA376

Amount of Each Receipt this Period
 500.00

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

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

1860.00

**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 21 OF 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Lawrence Post

Mailing Address 1160 Tower Rd.

City Beverly Hills State CA Zip Code 90210

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

Name of Employer Arena Capital Occupation Investment Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : INCA543

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ivan Presant

Mailing Address 1403 Tower Dr.

City Edgewater State NJ Zip Code 07020

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

Name of Employer Clifford Chance Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : INCA664

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ryan Rodriguez

Mailing Address 5000 Birch St. Ste. 3000

City Newport Beach State CA Zip Code 92660

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

Name of Employer Ryan Rodriguez Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : INCA538

Amount of Each Receipt this Period
500.00

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 22 OF 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Yechiel Rosenfeld

Mailing Address 144 S. Roxbury Dr.

City State Zip Code
Beverly Hills CA 90212

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : INCA650

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Stanley P. Roth

Mailing Address 17121 Grand Bay Dr.

City State Zip Code
Boca Raton FL 33496

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : INCA496

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Kenneth A. Ruby

Mailing Address 11845 W. Olympic Blvd. Ste. 1200
West Tower

City State Zip Code
Los Angeles CA 90064

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

Name of Employer Occupation
Kenneth Ruby Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : INCA504

Amount of Each Receipt this Period
2600.00

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

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

3600.00

**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 23 OF 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Adam Runsdorf

Mailing Address 3152 Saint Annes Dr.

City State Zip Code
Boca Raton FL 33496

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

Name of Employer Occupation
Woodfield Distribution, LLC Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 15 / 2014

Transaction ID : INCA514

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Lee Samson

Mailing Address 9200 Sunset Blvd. Ste. 700

City State Zip Code
West Hollywood CA 90069

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

Name of Employer Occupation
SNF Management CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 09 / 2014

Transaction ID : INCA444

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Moshe Sassover

Mailing Address 13116 E. Imperial Hwy.

City State Zip Code
Santa Fe Springs CA 90670

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

Name of Employer Occupation
Thirsty Oil Co. Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 09 / 2014

Transaction ID : INCA443

Amount of Each Receipt this Period
1000.00

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

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

2500.00

**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 24 OF 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Neil Schwartz

Mailing Address 20803 Valley Blvd.

City Walnut State CA Zip Code 91789

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

Name of Employer Neil Schwartz Occupation Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : INCA501

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Suzanne Schweitzer

Mailing Address 235 Denslow Ave.

City Los Angeles State CA Zip Code 90049

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

Name of Employer UCLA Occupation Clinical Research Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : INCA701

Amount of Each Receipt this Period
 250.00

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

Mailing Address 3925 Prado Del Maiz

City Calabasas State CA Zip Code 91302

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

Name of Employer Richard Sherman Occupation Psychologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 03 / 2014

Transaction ID : INCA619

Amount of Each Receipt this Period
 500.00

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 25 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Sheldon Spector

Mailing Address 1139 Stratford St.

City Santa Monica State CA Zip Code 90403

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

Name of Employer Calif. Allergy & Asthma Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : INCA651

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Joel L. Strom

Mailing Address

City State Zip Code

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

Name of Employer Joel I. Strom D.D.S. APC Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 01 / 2014

Transaction ID : INCA359

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jon Ungvari

Mailing Address 618 N. Bedford Dr.

City Beverly Hills State CA Zip Code 90210

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : INCA604

Amount of Each Receipt this Period
250.00

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 26 OF 61
	<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)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Ron Ventura

Mailing Address 3820 Topaz Avenue

City Las Vegas State NV Zip Code 89121

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

Name of Employer Ventura Enterprises Occupation Real Estate Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : INCA562

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Peter Weidman

Mailing Address 235 E. 73rd St.

City New York State NY Zip Code 10021

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

Name of Employer Goldman Sachs Occupation Banking

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 12 / 2014

Transaction ID : INCA640

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Susan Weintraub

Mailing Address 24 Bridgeport

City Manhattan Beach State CA Zip Code 90266

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA673

Amount of Each Receipt this Period
 500.00

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

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

1750.00

54320.00

**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 27 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
Committee To Elect Liz Barney

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2014

Transaction ID : INCA658

Amount of Each Receipt this Period

50.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

50.00

50.00

**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 28 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Carr for Congress

A. Full Name (Last, First, Middle Initial)
River City Business Services

Mailing Address 5429 Madison Ave.

City Sacramento State CA Zip Code 95841

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2014

Transaction ID : INCA638

Amount of Each Receipt this Period
 4337.66

Refund of debit error

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	4337.66
TOTAL This Period (last page this line number only).....	4337.66

**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 29 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. 1370 Realty Corporation			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 14545 Friar St., #101			Amount of Each Disbursement this Period 1377.34
City Van Nuys	State CA	Zip Code 91411	Transaction ID : EXPB421
Purpose of Disbursement Office Rent		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. Anedot, Inc.			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address Third St., #2B			Amount of Each Disbursement this Period 23.90
City Baton Rouge	State LA	Zip Code 70801	Transaction ID : EXPB577
Purpose of Disbursement Credit card processing fee		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) C. Anedot, Inc.			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address Third St., #2B			Amount of Each Disbursement this Period 19.80
City Baton Rouge	State LA	Zip Code 70801	Transaction ID : EXPB576
Purpose of Disbursement Credit card processing fee		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:		

SUBTOTAL of Disbursements This Page (optional).....	1421.04
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 30 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 578.87
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	Transaction ID : EXPB578
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. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 31.80
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	Transaction ID : EXPB571
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) c. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 101.70
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	Transaction ID : EXPB572
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:		

SUBTOTAL of Disbursements This Page (optional).....	712.37
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 31 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 78.60 Transaction ID : EXPB573
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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. Anedot, Inc.		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 223.20 Transaction ID : EXPB570
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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) C. Anedot, Inc.		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 247.20 Transaction ID : EXPB574
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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:	

SUBTOTAL of Disbursements This Page (optional).....	549.00
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 32 OF 61	
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 167.32 Transaction ID : EXPB575
City Baton Rouge State LA Zip Code 70801	Purpose of Disbursement Credit card processing fee 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. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 355.95 Transaction ID : EXPB584
City Baton Rouge State LA Zip Code 70801	Purpose of Disbursement Credit card processing fee 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) C. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 34.50 Transaction ID : EXPB586
City Baton Rouge State LA Zip Code 70801	Purpose of Disbursement Credit card processing fee 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:		

SUBTOTAL of Disbursements This Page (optional).....	557.77
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 33 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 43.80
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	Transaction ID : EXPB585
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. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 58.80
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	Transaction ID : EXPB583
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) c. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 67.91
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	Transaction ID : EXPB587
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:		

SUBTOTAL of Disbursements This Page (optional).....	170.91
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 34 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 48.87 Transaction ID : EXPB582
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 51.18 Transaction ID : EXPB580
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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) C. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 18.75 Transaction ID : EXPB579
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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:	

SUBTOTAL of Disbursements This Page (optional).....	118.80
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 35 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 101.70
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	Transaction ID : EXPB581
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. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 750.70
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	Transaction ID : EXPB588
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) c. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 42.52
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	Transaction ID : EXPB589
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:		

SUBTOTAL of Disbursements This Page (optional).....	894.92
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 36 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement MM / DD / YYYY 04 / 10 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 43.50 Transaction ID : EXPB590
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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. Anedot, Inc.		Date of Disbursement MM / DD / YYYY 04 / 10 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 164.25 Transaction ID : EXPB591
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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) c. Anedot, Inc.		Date of Disbursement MM / DD / YYYY 04 / 11 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 101.70 Transaction ID : EXPB593
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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:	

SUBTOTAL of Disbursements This Page (optional).....	309.45
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 37 OF 61	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 39.30 Transaction ID : EXPB592
City Baton Rouge	State LA Zip Code 70801	
Purpose of Disbursement Credit card processing fee	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. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 101.70 Transaction ID : EXPB594
City Baton Rouge	State LA Zip Code 70801	
Purpose of Disbursement Credit card processing fee	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) c. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 163.35 Transaction ID : EXPB595
City Baton Rouge	State LA Zip Code 70801	
Purpose of Disbursement Credit card processing fee	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:		

SUBTOTAL of Disbursements This Page (optional).....	304.35
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 38 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 11.65 Transaction ID : EXPB597
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 5.28 Transaction ID : EXPB596
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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) C. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 45.20 Transaction ID : EXPB598
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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:	

SUBTOTAL of Disbursements This Page (optional).....	62.13
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 39 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 51.56 Transaction ID : EXPB599
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 87.22 Transaction ID : EXPB643
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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) C. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address Third St., #2B		Amount of Each Disbursement this Period 80.97 Transaction ID : EXPB644
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit card processing fee	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:	

SUBTOTAL of Disbursements This Page (optional).....	219.75
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 40 OF 61	
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Avila Alliance		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 333 City Blvd. West, #1610		Amount of Each Disbursement this Period 4000.00 Transaction ID : EXPB422
City Orange	State CA	
Zip Code 92868	Purpose of Disbursement Fundraising Consultant	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. Avila Alliance		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 333 City Blvd. West, #1610		Amount of Each Disbursement this Period 5828.24 Transaction ID : EXPB559
City Orange	State CA	
Zip Code 92868	Purpose of Disbursement Expense Reimbursement	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) c. 1370 Realty Corporation		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 14545 Friar St., #101		Amount of Each Disbursement this Period 1798.00 Transaction ID : EDTB3EXPB559 [MEMO ITEM]
City Van Nuys	State CA	
Zip Code 91411	Purpose of Disbursement Office Rent	Category/ Type 007
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:	

SUBTOTAL of Disbursements This Page (optional).....	9828.24
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 41 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. UCLA Recreation Center		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address		Amount of Each Disbursement this Period 1514.84
City Los Angeles	State CA	
Zip Code 90095	Purpose of Disbursement Facility Fee	Transaction ID : EDTB1EXPB559
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Van Nuys Design & Printing		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 14508 Erwin St.		Amount of Each Disbursement this Period 1160.85
City Van Nuys	State CA	
Zip Code 91411	Purpose of Disbursement Printing	Transaction ID : EDTB2EXPB559
Candidate Name	006 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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Nicole R. Bailar		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 550 N. Figueroa St., #3043		Amount of Each Disbursement this Period 1001.50
City Los Angeles	State CA	
Zip Code 90012	Purpose of Disbursement Salary	Transaction ID : EXPB490
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:		

SUBTOTAL of Disbursements This Page (optional).....	1001.50
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 42 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Nicole R. Bailar			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 550 N. Figueroa St., #3043			Amount of Each Disbursement this Period 1001.50	
City Los Angeles	State CA	Zip Code 90012	Transaction ID : EXPB554	
Purpose of Disbursement Salary		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. Nicole R. Bailar			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 550 N. Figueroa St., #3043			Amount of Each Disbursement this Period 1001.50	
City Los Angeles	State CA	Zip Code 90012	Transaction ID : EXPB634	
Purpose of Disbursement Salary		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) c. Bankcard Center			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014	
Mailing Address P.O. Box 30833			Amount of Each Disbursement this Period 1482.62	
City Salt Lake City	State UT	Zip Code 84130-0833	Transaction ID : EXPB426	
Purpose of Disbursement Credit card payment		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:				

SUBTOTAL of Disbursements This Page (optional).....	3485.62
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 43 OF 61	
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial)

A. Bankcard Center

Mailing Address P.O. Box 30833

City Salt Lake City State UT Zip Code 84130-0833

Purpose of Disbursement Credit card payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 21 / 2014

Amount of Each Disbursement this Period: 3000.00

Transaction ID : EXPB569

Category/Type: 001

Full Name (Last, First, Middle Initial)

B. Bankcard Center

Mailing Address P.O. Box 30833

City Salt Lake City State UT Zip Code 84130-0833

Purpose of Disbursement Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 14 / 2014

Amount of Each Disbursement this Period: 99.53

Transaction ID : EXPB646

Category/Type: 001

Full Name (Last, First, Middle Initial)

C. Budget Watchdogs Newsletter #134511

Mailing Address 1954 W. Carson St.

City Torrance State CA Zip Code 90501

Purpose of Disbursement Slate Mailer

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 15 / 2014

Amount of Each Disbursement this Period: 4445.00

Transaction ID : EXPB508

Category/Type: 004

SUBTOTAL of Disbursements This Page (optional) 7544.53

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 44 OF 61	
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. California Republican Taxpayers Association		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 1130 Fremont Blvd., #105-115		Amount of Each Disbursement this Period 960.00 Transaction ID : EXPB528
City Seaside State CA Zip Code 93955	Purpose of Disbursement Slate Mailer Candidate Name Category/Type 006	
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. California Voter Guide #595004		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 1954 W. Carson St.		Amount of Each Disbursement this Period 2257.00 Transaction ID : EXPB507
City Torrance State CA Zip Code 90501	Purpose of Disbursement Slate Mailer Candidate Name Category/Type 004	
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) C. Continuing the Republican Revolution #598041		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 1300 Bristol St. North, #100		Amount of Each Disbursement this Period 1500.00 Transaction ID : EXPB506
City Newport Beach State CA Zip Code 92660	Purpose of Disbursement Slate Mailer Candidate Name Category/Type 006	
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:	

SUBTOTAL of Disbursements This Page (optional).....	4717.00
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 45 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Crummitt & Associates		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 525 E. Seaside Way, #101-C		Amount of Each Disbursement this Period 4620.00 Transaction ID : EXPB526
City Long Beach State CA Zip Code 90802	Purpose of Disbursement Treasurer Services Candidate Name Category/Type 001	
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. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address		Amount of Each Disbursement this Period 321.84 Transaction ID : EXPB488
City Ogden State UT Zip Code 84201	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type 001	
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) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address		Amount of Each Disbursement this Period 1279.08 Transaction ID : EXPB492
City Ogden State UT Zip Code 84201	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type 001	
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:	

SUBTOTAL of Disbursements This Page (optional).....	6220.92
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 46 OF 61	
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Internal Revenue Service		M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code Ogden UT 84201		
Purpose of Disbursement Payroll Taxes		Transaction ID : EXPB556
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Internal Revenue Service		M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code Ogden UT 84201		
Purpose of Disbursement Payroll Taxes		Transaction ID : EXPB636
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Landslide Communications, Inc.		M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 30011 Ivy Glenn Dr., #223		Amount of Each Disbursement this Period
City State Zip Code Laguna Niguel CA 92677		
Purpose of Disbursement Slate Mailer		Transaction ID : EXPB509
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	25796.54
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 47 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Shannan L. Maynard			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014	
Mailing Address 560 S. Main St., #4N			Amount of Each Disbursement this Period 1001.50	
City Los Angeles	State CA	Zip Code 90013	Transaction ID : EXPB486	
Purpose of Disbursement Salary		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. Shannan L. Maynard			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address 560 S. Main St., #4N			Amount of Each Disbursement this Period 764.42	
City Los Angeles	State CA	Zip Code 90013	Transaction ID : EXPB487	
Purpose of Disbursement Salary		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) c. Shannan L. Maynard			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014	
Mailing Address 560 S. Main St., #4N			Amount of Each Disbursement this Period 1611.94	
City Los Angeles	State CA	Zip Code 90013	Transaction ID : EXPB491	
Purpose of Disbursement Salary		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:				

SUBTOTAL of Disbursements This Page (optional).....	3377.86
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 48 OF 61		
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Shannan L. Maynard		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 560 S. Main St., #4N		Amount of Each Disbursement this Period 207.86 Transaction ID : EXPB529
City Los Angeles	State CA	
Zip Code 90013	Purpose of Disbursement Expense Reimbursement	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. Shannan L. Maynard		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 560 S. Main St., #4N		Amount of Each Disbursement this Period 1611.94 Transaction ID : EXPB555
City Los Angeles	State CA	
Zip Code 90013	Purpose of Disbursement Salary	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) c. Shannan L. Maynard		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 560 S. Main St., #4N		Amount of Each Disbursement this Period 132.13 Transaction ID : EXPB564
City Los Angeles	State CA	
Zip Code 90013	Purpose of Disbursement Expense Reimbursement	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:	

SUBTOTAL of Disbursements This Page (optional).....	1951.93
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 49 OF 61		
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Shannan L. Maynard		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 560 S. Main St., #4N		Amount of Each Disbursement this Period 1611.94 Transaction ID : EXPB635
City Los Angeles	State CA	
Zip Code 90013	Purpose of Disbursement Salary	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. Midnite Oil		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 1413 1/2 W. Kenneth Rd., #232		Amount of Each Disbursement this Period 5620.00 Transaction ID : EXPB510
City Glendale	State CA	
Zip Code 91201	Purpose of Disbursement Website Maintenance	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) c. No Party Preference Voter Guide		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 5429 Madison Ave.		Amount of Each Disbursement this Period 1500.00 Transaction ID : EXPB524
City Sacramento	State CA	
Zip Code 95841	Purpose of Disbursement Slate Mailer	Category/ Type 006
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:	

SUBTOTAL of Disbursements This Page (optional).....	8731.94
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 50 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Political Data, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address P.O. Box 59570		Amount of Each Disbursement this Period 7500.00 Transaction ID : EXPB535
City Norwalk	State CA	
Zip Code 90652	Purpose of Disbursement Voter Files	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. Richard Rea		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 314 N. Reeder Ave.		Amount of Each Disbursement this Period 2500.00 Transaction ID : EXPB420
City Covina	State CA	
Zip Code 91724	Purpose of Disbursement Consulting/Strategy Services	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) C. River City Business Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 5429 Madison Ave.		Amount of Each Disbursement this Period 58.00 Transaction ID : EXPB493
City Sacramento	State CA	
Zip Code 95841	Purpose of Disbursement Payroll Services	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:	

SUBTOTAL of Disbursements This Page (optional).....	10058.00
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 51 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. River City Business Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 5429 Madison Ave.			Amount of Each Disbursement this Period 4337.66 Transaction ID : EXPB614
City Sacramento	State CA	Zip Code 95841	
Purpose of Disbursement Payroll Services	Candidate Name		Category/ Type 001
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. River City Business Services			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 5429 Madison Ave.			Amount of Each Disbursement this Period 58.00 Transaction ID : EXPB557
City Sacramento	State CA	Zip Code 95841	
Purpose of Disbursement Payroll Services	Candidate Name		Category/ Type 001
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) C. River City Business Services			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 5429 Madison Ave.			Amount of Each Disbursement this Period 58.00 Transaction ID : EXPB637
City Sacramento	State CA	Zip Code 95841	
Purpose of Disbursement Payroll Services	Candidate Name		Category/ Type 001
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:			

SUBTOTAL of Disbursements This Page (optional).....	4453.66
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 52 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Smart Media Group LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014	
Mailing Address 1427 Leslie Ave., #100			Amount of Each Disbursement this Period 49900.00	
City Alexandria	State VA	Zip Code 22301	Transaction ID : EXPB511	
Purpose of Disbursement Cable Media Buy		004 Category/ Type		
Candidate Name				
Office Sought:	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. Smart Media Group LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014	
Mailing Address 1427 Leslie Ave., #100			Amount of Each Disbursement this Period 49700.00	
City Alexandria	State VA	Zip Code 22301	Transaction ID : EXPB533	
Purpose of Disbursement Cable Media Buy		004 Category/ Type		
Candidate Name				
Office Sought:	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) c. Smart Media Group LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 1427 Leslie Ave., #100			Amount of Each Disbursement this Period 49700.00	
City Alexandria	State VA	Zip Code 22301	Transaction ID : EXPB550	
Purpose of Disbursement Cable Media Buy		004 Category/ Type		
Candidate Name				
Office Sought:	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:			

SUBTOTAL of Disbursements This Page (optional).....	149300.00
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 53 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Smart Media Group LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014	
Mailing Address 1427 Leslie Ave., #100			Amount of Each Disbursement this Period 8000.00	
City Alexandria	State VA	Zip Code 22301	Transaction ID : EXPB615	
Purpose of Disbursement Cable Media Buy		Category/ Type 004		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Smart Media Group LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 1427 Leslie Ave., #100			Amount of Each Disbursement this Period 10000.00	
City Alexandria	State VA	Zip Code 22301	Transaction ID : EXPB660	
Purpose of Disbursement Cable Media Buy		Category/ Type 004		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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) c. Thomas Partners Strategies			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014	
Mailing Address 1413 1/2 W. Kenneth Rd., #232			Amount of Each Disbursement this Period 6500.00	
City Glendale	State CA	Zip Code 91201	Transaction ID : EXPB259	
Purpose of Disbursement Consulting/Strategy		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	24500.00
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 54 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Thomas Partners Strategies			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014	
Mailing Address 1413 1/2 W. Kenneth Rd., #232			Amount of Each Disbursement this Period 32000.00	
City Glendale	State CA	Zip Code 91201	Transaction ID : EXPB424	
Purpose of Disbursement Television Production Costs		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. Thomas Partners Strategies			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 1413 1/2 W. Kenneth Rd., #232			Amount of Each Disbursement this Period 10437.29	
City Glendale	State CA	Zip Code 91201	Transaction ID : EXPB552	
Purpose of Disbursement Mailer		Category/ Type 004		
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) c. Thomas Partners Strategies			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address 1413 1/2 W. Kenneth Rd., #232			Amount of Each Disbursement this Period 6500.00	
City Glendale	State CA	Zip Code 91201	Transaction ID : EXPB563	
Purpose of Disbursement Consulting/Strategy		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: _____			

SUBTOTAL of Disbursements This Page (optional).....	48937.29
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 55 OF 61	
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Angela Toft		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address P.O. Box 721220		Amount of Each Disbursement this Period 3000.00 Transaction ID : EXPB428
City Pinon Hills	State CA	
Zip Code 92372	Purpose of Disbursement Campaign Scheduler	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. Angela Toft		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address P.O. Box 721220		Amount of Each Disbursement this Period 3428.58 Transaction ID : EXPB558
City Pinon Hills	State CA	
Zip Code 92372	Purpose of Disbursement Campaign Scheduler	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) C. John Van Winkle		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 4762 Beverly Ct.		Amount of Each Disbursement this Period 569.37 Transaction ID : EXPB258
City Riverside	State CA	
Zip Code 92506	Purpose of Disbursement Expense Reimbursement	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:	

SUBTOTAL of Disbursements This Page (optional).....	6997.95
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 56 OF 61			
	<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)
Carr for Congress

Full Name (Last, First, Middle Initial) A. John Van Winkle		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 4762 Beverly Ct.		Amount of Each Disbursement this Period 1500.00 Transaction ID : EXPB257
City Riverside	State CA	
Zip Code 92506	Purpose of Disbursement Campaign Manager	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. John Van Winkle		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 4762 Beverly Ct.		Amount of Each Disbursement this Period 708.47 Transaction ID : EXPB423
City Riverside	State CA	
Zip Code 92506	Purpose of Disbursement Expense Reimbursement	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) C. John Van Winkle		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 4762 Beverly Ct.		Amount of Each Disbursement this Period 2583.00 Transaction ID : EXPB548
City Riverside	State CA	
Zip Code 92506	Purpose of Disbursement Communications/Field Director	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:	

SUBTOTAL of Disbursements This Page (optional).....	4791.47
TOTAL This Period (last page this line number only).....	327014.54

**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 57 OF 61			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Carr for Congress

Full Name (Last, First, Middle Initial) A. Yoni Danieli		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 15 Greymore Dr.		Amount of Each Disbursement this Period 2600.00 Transaction ID : EXPB600
City Chesterfield	State MO	
Purpose of Disbursement Contribution Returned		Category/ Type 010
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
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:		

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	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	2600.00

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Carr for Congress

Transaction ID : PAYC33

LOAN SOURCE Full Name (Last, First, Middle Initial)
Elan S. Carr

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
P.O.Box 3800

City State ZIP Code
Beverly Hills CA 90212

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
30000.00 0.00 30000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 30000.00
TOTALS This Period (last page in this line only)..... ▶ 30000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : PAYC33

LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

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

(Use separate schedule(s) for each numbered line)	PAGE 60 OF 61
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Carr for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 1370 Realty Corporation	Nature of Debt (Purpose): Office Rent
Mailing Address 14545 Friar St., #101	
City State Zip Code Van Nuys CA 91411	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD703	
Amount Incurred This Period 1159.68	Payment This Period 0.00	Outstanding Balance at Close of This Period 1159.68

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AEGIS Security & Investigations	Nature of Debt (Purpose): Security Services
Mailing Address 10866 Washington Blvd., #309	
City State Zip Code Culver City CA 90232	

Outstanding Balance Beginning This Period 700.00	Transaction ID : PAYD494	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 700.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bankcard Center	Nature of Debt (Purpose): Credit card payment
Mailing Address P.O. Box 30833	
City State Zip Code Salt Lake City UT 84130-0833	

Outstanding Balance Beginning This Period 1482.62	Transaction ID : PAYD425	
Amount Incurred This Period 0.00	Payment This Period 1482.62	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	1859.68
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 61 OF 61
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Carr for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Crummitt & Associates	Nature of Debt (Purpose): Treasurer Services
Mailing Address 525 E. Seaside Way, #101-C	
City State Zip Code Long Beach CA 90802	

Outstanding Balance Beginning This Period 4620.00	Transaction ID : PAYD449	
Amount Incurred This Period 0.00	Payment This Period 4620.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Crummitt & Associates	Nature of Debt (Purpose): Treasurer Services
Mailing Address 525 E. Seaside Way, #101-C	
City State Zip Code Long Beach CA 90802	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD702	
Amount Incurred This Period 2060.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2060.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Smart Media Group LLC	Nature of Debt (Purpose): Cable Media Buy
Mailing Address 1427 Leslie Ave., #100	
City State Zip Code Alexandria VA 22301	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD662	
Amount Incurred This Period 31900.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 31900.00

1) SUBTOTALS This Period This Page (optional)	33960.00
2) TOTALS This Period (last page this line number only)	35819.68
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	30000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	65819.68