



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

**Hernandez for Congress 2016**

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)) ....	2500.00	91880.00
(b) Total Contribution Refunds (from Line 20(d)) .....	2000.00	2000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	500.00	89880.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	44296.15	44296.15
(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)) .....	44296.15	44296.15
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	125631.85	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	90963.90	

**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

**Hernandez for Congress 2016**

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).....	-5000.00	82350.00
(ii) Unitemized .....	2500.00	2500.00
(iii) TOTAL of contributions from individuals .....	-2500.00	84850.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	7030.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	2500.00	91880.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	80000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	80000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	48.00	48.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	2548.00	171928.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	44296.15	44296.15
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 .....	2000.00	2000.00
(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)).....	2000.00	2000.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	46296.15	46296.15

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	169380.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2548.00
25. SUBTOTAL (add Line 23 and Line 24).....	171928.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	46296.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	125631.85

**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 24
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Hernandez for Congress 2016**

**A.** Full Name (Last, First, Middle Initial)  
**Ihsan Ahmad Daleq**

Mailing Address 19050 Colima Rd. Apt 144

City State Zip Code  
Rowland Heights CA 91748

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2016

**Transaction ID : INCA68**

Amount of Each Receipt this Period  
 -2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Randah B. Najjar**

Mailing Address 1405 W Greenhaven Ave.

City State Zip Code  
San Dimas CA 91773

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2016

**Transaction ID : INCA70**

Amount of Each Receipt this Period  
 -2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Leslie N. Tafoya**

Mailing Address 4215 N Sunflower Ave.

City State Zip Code  
Covina CA 91724

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2016

**Transaction ID : INCA69**

Amount of Each Receipt this Period  
 -5200.00

Memo Item

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

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

-10600.00

**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 24
	<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)  
**Hernandez for Congress 2016**

**A.** Full Name (Last, First, Middle Initial)  
**Ihsan Ahmad Daleq**

Mailing Address 19050 Colima Rd. Apt 144

City State Zip Code  
Rowland Heights CA 91748

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2016

**Transaction ID : INCA73**

Amount of Each Receipt this Period  
 2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Leslie N. Tafoya**

Mailing Address 4215 N Sunflower Ave.

City State Zip Code  
Covina CA 91724

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2016

**Transaction ID : INCA71**

Amount of Each Receipt this Period  
 2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Leslie N. Tafoya**

Mailing Address 4215 N Sunflower Ave.

City State Zip Code  
Covina CA 91724

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

Name of Employer Occupation  
None Homemaker

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2016

**Transaction ID : INCA75**

Amount of Each Receipt this Period  
 -5200.00

Memo Item

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

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

200.00

**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 24
	<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)  
**Hernandez for Congress 2016**

**A.** Full Name (Last, First, Middle Initial)  
**Santa Ynez Band of Mission Indians**

Mailing Address P.O. Box 517

City Santa Ynez State CA Zip Code 93460

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2016**

**Transaction ID : INCA86**

Amount of Each Receipt this Period  
**2700.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Santa Ynez Band of Mission Indians**

Mailing Address P.O. Box 517

City Santa Ynez State CA Zip Code 93460

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2016**

**Transaction ID : INCA88**

Amount of Each Receipt this Period  
**2700.00**

Memo Item

**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

Memo Item

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

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

**5400.00**

**-5000.00**

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 24
	<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)  
**Hernandez for Congress 2016**

**A.** Full Name (Last, First, Middle Initial)  
**Drive Committee**

Mailing Address 25 Louisiana Ave. NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : INCA114**

Amount of Each Receipt this Period  
5000.00

Memo Item

**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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

5000.00

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 24			
	<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)  
**Hernandez for Congress 2016**

**A. Gould & Orellana, LLC.**

Full Name (Last, First, Middle Initial)  
Mailing Address 249 E. Ocean Blvd. Ste. 685

City Long Beach State CA Zip Code 90802

Purpose of Disbursement PAC Management/Political Reporting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 05 / 2016

Amount of Each Disbursement this Period: 2000.00

Memo Item

Transaction ID : EXPB4

Category/Type: 001

**B. California Democratic Party**

Full Name (Last, First, Middle Initial)  
Mailing Address 1830 9th Street

City Sacramento State CA Zip Code 95814

Purpose of Disbursement Endorsement Interview Fee

Candidate Name California Democratic Party

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 06 / 2016

Amount of Each Disbursement this Period: 350.00

Memo Item

Transaction ID : EXPB5

Category/Type: 001

**C. Gould & Orellana, LLC.**

Full Name (Last, First, Middle Initial)  
Mailing Address 249 E. Ocean Blvd. Ste. 685

City Long Beach State CA Zip Code 90802

Purpose of Disbursement PAC Management/Political Reporting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 08 / 2016

Amount of Each Disbursement this Period: 2000.00

Memo Item

Transaction ID : EXPB58

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 4350.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 24			
	<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)  
**Hernandez for Congress 2016**

Full Name (Last, First, Middle Initial) <b>A. Gould &amp; Orellana, LLC.</b>			Date of Disbursement MM / DD / YYYY 01 / 08 / 2016		
Mailing Address 249 E. Ocean Blvd. Ste. 685			Amount of Each Disbursement this Period 2000.00		
City Long Beach	State CA	Zip Code 90802	Memo Item <input type="checkbox"/>		
Purpose of Disbursement PAC Management/Political Reporting Services		Category/ Type 001	Transaction ID : EXPB56		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Gould &amp; Orellana, LLC.</b>			Date of Disbursement MM / DD / YYYY 01 / 08 / 2016		
Mailing Address 249 E. Ocean Blvd. Ste. 685			Amount of Each Disbursement this Period 250.00		
City Long Beach	State CA	Zip Code 90802	Memo Item <input type="checkbox"/>		
Purpose of Disbursement PAC Management/Political Reporting Services		Category/ Type 001	Transaction ID : EXPB7		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. The House of Printing, Inc</b>			Date of Disbursement MM / DD / YYYY 01 / 21 / 2016		
Mailing Address 3336 E. Colorado Blvd.			Amount of Each Disbursement this Period 401.12		
City Pasadena	State CA	Zip Code 91107	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Letterhead Printing		Category/ Type 004	Transaction ID : EXPB67		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2651.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 24			
	<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)  
**Hernandez for Congress 2016**

**A. Gould & Orellana, LLC.**

Full Name (Last, First, Middle Initial)  
Mailing Address 249 E. Ocean Blvd. Ste. 685

City Long Beach State CA Zip Code 90802

Purpose of Disbursement PAC Management/ Political Reporting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 01 / 2016

Amount of Each Disbursement this Period: 2000.00

Memo Item

Transaction ID : EXPB74

Category/Type: 001

**B. Cogs South**

Full Name (Last, First, Middle Initial)  
Mailing Address 3309 S. Main Street

City Santa Ana State CA Zip Code 92707

Purpose of Disbursement Yard Signs on Wires

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 19 / 2016

Amount of Each Disbursement this Period: 5013.90

Memo Item

Transaction ID : EXPB81

Category/Type: 004

**C. Impact Placements**

Full Name (Last, First, Middle Initial)  
Mailing Address 3313 S. Main Street #526

City Santa Ana State CA Zip Code 92707

Purpose of Disbursement Street Signs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 19 / 2016

Amount of Each Disbursement this Period: 2950.00

Memo Item

Transaction ID : EXPB79

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional) ..... 9963.90

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 24	
	<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)  
**Hernandez for Congress 2016**

Full Name (Last, First, Middle Initial) <b>A. Secretary of State</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2016
Mailing Address 1500 11th Street Room 495		Amount of Each Disbursement this Period 1740.00 <input type="checkbox"/> Memo Item <b>Transaction ID : EXPB83</b>
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Candidate Filing Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gould &amp; Orellana, LLC.</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2016
Mailing Address 249 E. Ocean Blvd. Ste. 685		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item <b>Transaction ID : EXPB84</b>
City Long Beach State CA Zip Code 90802	Purpose of Disbursement PAC Management/Political Reporting Services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Political Data Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address P.O. Box 59570		Amount of Each Disbursement this Period 700.00 <input type="checkbox"/> Memo Item <b>Transaction ID : EXPB85</b>
City Norwalk State CA Zip Code 90652	Purpose of Disbursement Online Software 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4440.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 24			
	<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)  
**Hernandez for Congress 2016**

Full Name (Last, First, Middle Initial) <b>A. Gould &amp; Orellana, LLC.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016		
Mailing Address 249 E. Ocean Blvd. Ste. 685			Amount of Each Disbursement this Period 362.76		
City Long Beach	State CA	Zip Code 90802	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Office Expenses		Category/ Type 001	Transaction ID : EXPB91		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Nichol Delgado</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016		
Mailing Address 1242 Savona Place			Amount of Each Disbursement this Period 3.91		
City Pomona	State CA	Zip Code 91766	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Office Expenses		Category/ Type 001	Transaction ID : EXPB95		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Nichol Delgado</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016		
Mailing Address 1242 Savona Place			Amount of Each Disbursement this Period 2000.00		
City Pomona	State CA	Zip Code 91766	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Campaign Management Services		Category/ Type 001	Transaction ID : EXPB96		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2366.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 24			
	<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)  
**Hernandez for Congress 2016**

Full Name (Last, First, Middle Initial) <b>A. Laura M. Herrera</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 3123 Walnut Street		Amount of Each Disbursement this Period 60.00
City Huntington Park	State CA	
Zip Code 90255	Purpose of Disbursement Norwalk Custom Maps	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : EXPB94</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Registrar Recorder-County Clerk</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 12400 Imperial Highway		Amount of Each Disbursement this Period 4800.00
City Norwalk	State CA	
Zip Code 90650	Purpose of Disbursement Ballot Statement Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	<b>Transaction ID : EXPB98</b>
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) <b>C. Michael Wong</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 2071 S. Atlantic Blvd. #H		Amount of Each Disbursement this Period 1500.00
City Monterey Park	State CA	
Zip Code 91754	Purpose of Disbursement Space Office Rent	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : EXPB97</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6360.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 24			
	<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)  
**Hernandez for Congress 2016**

Full Name (Last, First, Middle Initial) <b>A. Woodland Hills Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 21602 Ventura Blvd.			Amount of Each Disbursement this Period 2180.00
City Woodland Hills	State CA	Zip Code 91364	
Purpose of Disbursement Printing of Banners		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 004			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : EXPB93
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Nichol Delgado</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016
Mailing Address 1242 Savona Place			Amount of Each Disbursement this Period 257.63
City Pomona	State CA	Zip Code 91766	
Purpose of Disbursement Office Expenses		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : EXPB103
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Nichol Delgado</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016
Mailing Address 1242 Savona Place			Amount of Each Disbursement this Period 2000.00
City Pomona	State CA	Zip Code 91766	
Purpose of Disbursement Campaign Management Services		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : EXPB100
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4437.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 24			
	<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)  
**Hernandez for Congress 2016**

Full Name (Last, First, Middle Initial) <b>A. Laura M. Herrera</b>			Date of Disbursement MM / DD / YYYY 03 / 14 / 2016		
Mailing Address 3123 Walnut Street			Amount of Each Disbursement this Period 70.16		
City Huntington Park	State CA	Zip Code 90255	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Office Expenses		Category/ Type 001	Transaction ID : EXPB102		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Laura M. Herrera</b>			Date of Disbursement MM / DD / YYYY 03 / 14 / 2016		
Mailing Address 3123 Walnut Street			Amount of Each Disbursement this Period 900.00		
City Huntington Park	State CA	Zip Code 90255	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Campaign Management Services		Category/ Type 001	Transaction ID : EXPB101		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Nichol Delgado</b>			Date of Disbursement MM / DD / YYYY 03 / 23 / 2016		
Mailing Address 1242 Savona Place			Amount of Each Disbursement this Period 212.41		
City Pomona	State CA	Zip Code 91766	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Office Expenses		Category/ Type 001	Transaction ID : EXPB106		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1182.57
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 24			
	<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)  
**Hernandez for Congress 2016**

Full Name (Last, First, Middle Initial) <b>A. Laura M. Herrera</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016		
Mailing Address 3123 Walnut Street			Amount of Each Disbursement this Period 9.99		
City Huntington Park	State CA	Zip Code 90255	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Office Expenses		Category/ Type 001	Transaction ID : EXPB107		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Nichol Delgado</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016		
Mailing Address 1242 Savona Place			Amount of Each Disbursement this Period 533.20		
City Pomona	State CA	Zip Code 91766	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Campaign Management Services		Category/ Type 001	Transaction ID : EXPB108		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Nichol Delgado</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016		
Mailing Address 1242 Savona Place			Amount of Each Disbursement this Period 59.38		
City Pomona	State CA	Zip Code 91766	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Office Expenses		Category/ Type 001	Transaction ID : EXPB109		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	602.57
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 24			
	<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)  
**Hernandez for Congress 2016**

Full Name (Last, First, Middle Initial) <b>A. Laura M. Herrera</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 30 / 2016</b>
Mailing Address <b>3123 Walnut Street</b>		Amount of Each Disbursement this Period <b>1875.00</b>
City <b>Huntington Park</b>	State <b>CA</b> Zip Code <b>90255</b>	
Purpose of Disbursement <b>Campaign Management Services</b>	Category/Type <b>001</b>	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : EXPB110</b>
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Political Data Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 30 / 2016</b>
Mailing Address <b>P.O. Box 59570</b>		Amount of Each Disbursement this Period <b>5950.00</b>
City <b>Norwalk</b>	State <b>CA</b> Zip Code <b>90652</b>	
Purpose of Disbursement <b>Online Software</b>	Category/Type <b>004</b>	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : EXPB111</b>
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>7825.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>44179.46</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 24			
	<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)  
**Hernandez for Congress 2016**

Full Name (Last, First, Middle Initial) <b>A. Santa Ynez Band of Mission Indians</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address P.O. Box 517			Amount of Each Disbursement this Period 2000.00	
City Santa Ynez	State CA	Zip Code 93460	<input type="checkbox"/> Memo Item <b>Transaction ID : EXPB89</b>	
Purpose of Disbursement Refund of Excess Contribution		Category/ Type 010		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item	
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) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item	
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	2000.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Hernandez for Congress 2016** Transaction ID : **PAYC53**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  Memo Item **Roger Hernandez** Election: 2016  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 301 S. Glendora Ave. Unit 2504

City State ZIP Code  
 West Covina CA 91790

Original Amount of Loan 60200.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 60200.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred M 12 / D 31 / Y 2015	Date Due M / D / Y . None	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	------------------------------	-------------------------------	---

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	[ ] 60200.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : PAYC53

Personal Funds

Form/Schedule:

Transaction ID:

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Hernandez for Congress 2016** Transaction ID : **PAYC55**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  Memo Item Election: 2016  
**Roger Hernandez**  Primary  
 Mailing Address 301 S. Glendora Ave. Unit 2504 General  
 Other (specify) ▼

City State ZIP Code  
 West Covina CA 91790

Original Amount of Loan 19800.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 19800.00
-------------------------------------	------------------------------------	---

**TERMS** Date Incurred Date Due Interest Rate Secured:  
 M<sup>M</sup> / D<sup>D</sup> / Y<sup>Y</sup>Y<sup>Y</sup>Y<sup>Y</sup> M<sup>M</sup> / D<sup>D</sup> / Y<sup>Y</sup>Y<sup>Y</sup>Y<sup>Y</sup> 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="19800.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input type="text" value="80000.00"/>

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 : PAYC55

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 24 OF 24
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Hernandez for Congress 2016**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cogs South</b>		Nature of Debt (Purpose): Yard Signs on Wires
Mailing Address 3309 S. Main Street		
City State	Zip Code	
Santa Ana CA	92707	

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD77</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
5013.90	0.00	5013.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gould &amp; Orellana, LLC.</b>		Nature of Debt (Purpose): PAC Management/Political Reporting Services
Mailing Address 249 E. Ocean Blvd. Ste. 685		
City State	Zip Code	
Long Beach CA	90802	

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD57</b>	
5000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	2000.00	3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Impact Placements</b>		Nature of Debt (Purpose): Street Signs
Mailing Address 3313 S. Main Street #526		
City State	Zip Code	
Santa Ana CA	92707	

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD78</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2950.00	0.00	2950.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	10963.90
2) <b>TOTALS</b> This Period (last page this line number only) .....	10963.90
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	80000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	90963.90