

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
SANDRA MARSHALL FOR CONGRESS

ADDRESS (number and street) PO BOX 4528
 Check if different than previously reported. (ACC) SAN LUIS OBISPO CA 93403

2. **FEC IDENTIFICATION NUMBER** C00560326 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
CA 24

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2014 through M M / D D / Y Y Y Y 03 / 31 / 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 Cole Eminger
Signature of Treasurer Cole Eminger *[Electronically Filed]* Date M M / D D / Y Y Y Y 05 / 30 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

SANDRA MARSHALL 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))....	325.00	325.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	325.00	325.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	12947.20	12947.20
(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)).....	12947.20	12947.20
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5042.80	
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).....	17665.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

SANDRA MARSHALL 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).....	0.00	0.00
(ii) Unitemized.....	325.00	325.00
(iii) TOTAL of contributions from individuals ▶	325.00	325.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	325.00	325.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	17665.00	17665.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	17665.00	17665.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	17990.00	17990.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12947.20	12947.20
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	12947.20	12947.20

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	17990.00
25. SUBTOTAL (add Line 23 and Line 24).....	17990.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12947.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5042.80

**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 11
	<input type="checkbox"/> 11a 12 <input checked="" 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)
SANDRA MARSHALL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sandra Jean Marshall		Date of Receipt M M / D D / Y Y Y Y 03 / 04 / 2014	
Mailing Address 1612 Lima Dr		Transaction ID : SA13A.4241	
City San Luis Obispo	State CA	Zip Code 93405	
FEC ID number of contributing federal political committee. C H8CA23087		Amount of Each Receipt this Period 5000.00	
Name of Employer Self - Information Press	Occupation Publisher		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) B. Sandra Jean Marshall		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2014	
Mailing Address 1612 Lima Dr		Transaction ID : SA13A.4238	
City San Luis Obispo	State CA	Zip Code 93405	
FEC ID number of contributing federal political committee. C H8CA23087		Amount of Each Receipt this Period 1740.00	
Name of Employer Self - Information Press	Occupation Publisher		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 6740.00		

Full Name (Last, First, Middle Initial) C. Sandra Jean Marshall		Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2014	
Mailing Address 1612 Lima Dr		Transaction ID : SA13A.4239	
City San Luis Obispo	State CA	Zip Code 93405	
FEC ID number of contributing federal political committee. C H8CA23087		Amount of Each Receipt this Period 2195.00	
Name of Employer Self - Information Press	Occupation Publisher		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8935.00		

SUBTOTAL of Receipts This Page (optional).....	8935.00
TOTAL This Period (last page this line number only).....	8935.00

**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 11
	<input type="checkbox"/> 11a 12 <input checked="" 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)
SANDRA MARSHALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sandra Jean Marshall

Mailing Address 1612 Lima Dr

City San Luis Obispo State CA Zip Code 93405

FEC ID number of contributing federal political committee. **C H8CA23087**

Name of Employer Self - Information Press Occupation Publisher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
17665.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : SA13A.4240

Amount of Each Receipt this Period
8730.00

Campaign Funding Loan

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).....

8730.00

17665.00

**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 7 OF 11			
	<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)
SANDRA MARSHALL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. California Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 1500 11th St.		Amount of Each Disbursement this Period 1740.00 Transaction ID : SB17.4125
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Campaign Filing Fee 005 Category/Type	
Candidate Name SANDRA MARSHALL FOR CONGRESS	Office Sought: <input checked="" 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: CA District: 24		

Full Name (Last, First, Middle Initial) B. San Luis Obispo County Clerk-Recorder Office		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 1055 Monterey St.		Amount of Each Disbursement this Period 2195.00 Transaction ID : SB17.4127
City San Luis Obispo State CA Zip Code 93408	Purpose of Disbursement Campaign Filing Fee 005 Category/Type	
Candidate Name SANDRA MARSHALL FOR CONGRESS	Office Sought: <input checked="" 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: CA District: 24		

Full Name (Last, First, Middle Initial) c. Santa Barbara County Registrar's Office		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 4440-A Calle Real		Amount of Each Disbursement this Period 8730.00 Transaction ID : SB17.4130
City Santa Barbara State CA Zip Code 93110	Purpose of Disbursement Campaign Filing Fee 005 Category/Type	
Candidate Name SANDRA MARSHALL FOR CONGRESS	Office Sought: <input checked="" 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: CA District: 24		

SUBTOTAL of Disbursements This Page (optional).....	12665.00
TOTAL This Period (last page this line number only).....	12665.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SANDRA MARSHALL FOR CONGRESS** Transaction ID : **SC/10.4241**

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2014
Sandra Jean Marshall Primary
 Mailing Address 1612 Lima Dr General
 Other (specify) ▼

City State ZIP Code
 San Luis Obispo CA 93405

Original Amount of Loan 5000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5000.00
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TERMS

Date Incurred M 03 / D 04 / Y 2014	Date Due M M / D D / Y 12/25/14	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....	▶	[] 5000.00
TOTALS 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SANDRA MARSHALL FOR CONGRESS** Transaction ID : **SC/10.4238**

LOAN SOURCE Full Name (Last, First, Middle Initial) Sandra Jean Marshall	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1612 Lima Dr		

City	State	ZIP Code
San Luis Obispo	CA	93405

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1740.00	0.00	1740.00

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 03	D 07	Y 2014	M M / D D / Y 12/25/14	0.00 % (apr)	<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: []

SUBTOTALS This Period This Page (optional).....	▶	1740.00
TOTALS 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.		

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)

Transaction ID : SC/10.4239

SANDRA MARSHALL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Sandra Jean Marshall

Primary

General

Other (specify) ▼

Mailing Address

1612 Lima Dr

City

State

ZIP Code

San Luis Obispo

CA

93405

Original Amount of Loan

2195.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2195.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

03 / 11 / 2014

/ / 12/25/14

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)..... ▶

2195.00

TOTALS 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SANDRA MARSHALL FOR CONGRESS** Transaction ID : **SC/10.4240**

LOAN SOURCE Full Name (Last, First, Middle Initial) Sandra Jean Marshall	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1612 Lima Dr		

City	State	ZIP Code
San Luis Obispo	CA	93405

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
8730.00	0.00	8730.00

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 24 / Y 2014	M / D / Y 12/25/14			0.00 % (apr)	<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: []

SUBTOTALS This Period This Page (optional).....	8730.00
TOTALS This Period (last page in this line only).....	17665.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	