

# 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

Chad Condit For Congress

ADDRESS (number and street) ▼

2205 Mauna Loa Dr.

Check if different than previously reported. (ACC)

Ceres

CA

95307

2. **FEC IDENTIFICATION NUMBER** ▼

C C00515494

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA

10

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Harry Herbert

Signature of Treasurer Harry Herbert

[Electronically Filed]

Date

/  /

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Chad Condit For Congress**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	17700.25	17700.25
(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)).....	17700.25	17700.25
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	13914.32	13914.32
(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)).....	13914.32	13914.32
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	5525.93	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	1740.00	

**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

**Chad Condit For Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15650.00	15650.00
(ii) Unitemized .....	2050.25	2050.25
(iii) TOTAL of contributions from individuals .....	17700.25	17700.25
(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))..	17700.25	17700.25
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	1740.00	1740.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	1740.00	1740.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	19440.25	19440.25

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	13914.32	13914.32
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	13914.32	13914.32

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	19440.25
25. SUBTOTAL (add Line 23 and Line 24).....	19440.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	13914.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5525.93

**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 14
	<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)  
**Chad Condit For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Care Solutiona LLC**

Mailing Address 1034 12th St.

City Modesto State CA Zip Code 95354

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2012

**Transaction ID : SA11AI.4275**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Care Solutiona LLC**

Mailing Address 1034 12th St.

City Modesto State CA Zip Code 95354

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2012

**Transaction ID : SA11AI.4277**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Larry Davis**

Mailing Address 3724 hillcrest Ln.

City Sacramento State CA Zip Code 95821

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

Name of Employer Occupation  
 Sacramento Metro Fire Fire Chief

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2012

**Transaction ID : SA11AI.4307**

Amount of Each Receipt this Period  
 500.00

**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 14
	<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)  
**Chad Condit For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Evans**

Mailing Address 1500 Bigaroon Ct.

City Ceres State CA Zip Code 95307

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2012

**Transaction ID : SA11AI.4295**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Walter Hughes**

Mailing Address 9128 Quail Terrace Way

City Elk Grove State CA Zip Code 95328

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

Name of Employer Comcasr Occupation Lobbyist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.4303**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Charles Lyons**

Mailing Address 10559 Maze Blvd.

City Modesto State CA Zip Code 95351

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

Name of Employer Mapes Ranch Occupation Rancher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : SA11AI.4350**

Amount of Each Receipt this Period  
 1500.00

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

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

2300.00

**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 14
	<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)  
**Chad Condit For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Machado II**

Mailing Address 1320 Ricardo Way

City Modesto State CA Zip Code 95350

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

Name of Employer Care Solutions Treatment Cnt. Occupation Substance Abuse Conselor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : SA11AI.4341**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 700 Front St. #801

City San Diego State CA Zip Code 92101

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : SA11AI.4345**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**John Martin**

Mailing Address 9306 E. Whitewing Dr.

City Scottsdale State AZ Zip Code 85262

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : SA11AI.4339**

Amount of Each Receipt this Period  
1000.00

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

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

3750.00

**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 14
	<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)  
**Chad Condit For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Terence McHale**

Mailing Address 9146 Quail Brook Cir.

City Elk Grove State CA Zip Code 95624

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

Name of Employer Read & Associates Occupation Lobbyist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 02 / 2012

**Transaction ID : SA11AI.4273**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Parker Miko**

Mailing Address P.O. Box 3938

City Brookhaven State MS Zip Code 39603

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 13 / 2012

**Transaction ID : SA11AI.4287**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Pamela Novellino**

Mailing Address 1750 Kettner Blvd.

City San Diego State CA Zip Code 92101

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2012

**Transaction ID : SA11AI.4347**

Amount of Each Receipt this Period  
 250.00

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

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

3250.00



**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 14
	<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)  
**Chad Condit For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steve Peace**

Mailing Address 123 Camino de la Reina  
Ste 202 E

City San Diego State CA Zip Code 92108

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

Name of Employer Slef Employed Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2012

**Transaction ID : SA11AI.4285**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 12945 Orange Rd

City Wilton State CA Zip Code 95693

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

Name of Employer John Pennisi-Tranklin Ranch Occupation Rancher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2012

**Transaction ID : SA11AI.4278**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Toni Symonds**

Mailing Address 3005 6th St.

City Sacramento State CA Zip Code 95818

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

Name of Employer ASSU Jobs Committee Occupation Chief Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2012

**Transaction ID : SA11AI.4311**

Amount of Each Receipt this Period  
 350.00

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

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

3350.00

15650.00

**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 14
	<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)  
**Chad Condit For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHAD MATTHEW CONDIT**

Mailing Address 2509 ACORN LANE

City CERES State CA Zip Code 95301

FEC ID number of contributing federal political committee. **C H2CA10152**

Name of Employer N/A Occupation Unemployed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2012

**Transaction ID : SA13A.4123**

Amount of Each Receipt this Period  
 1740.00

**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).....

1740.00

1740.00

**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 11 OF 14			
	<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)  
**Chad Condit For Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2012
Mailing Address 1410 E Hatch Rd. Ste 1		Amount of Each Disbursement this Period 1134.40
City Modesto State CA Zip Code 95351	Category/Type 001	
Purpose of Disbursement	Candidate Name <b>Chad Condit For Congress</b>	<b>Transaction ID : SB17.4261</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. California Secretary of State</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2012
Mailing Address 1500 11th St.		Amount of Each Disbursement this Period 1740.00
City Sacramento State CA Zip Code 95814	Category/Type 001	
Purpose of Disbursement Filing Fee	Candidate Name <b>Chad Condit For Congress</b>	<b>Transaction ID : SB17.4257</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Chance Condit</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 2509 Acorn Ln.		Amount of Each Disbursement this Period 600.00
City Ceres State CA Zip Code 95307	Category/Type 001	
Purpose of Disbursement	Candidate Name <b>CHAD MATTHEW CONDIT</b>	<b>Transaction ID : SB17.4268</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3474.40
<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 12 OF 14			
	<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)  
**Chad Condit For Congress**

Full Name (Last, First, Middle Initial) <b>A. Chance Condit</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012
Mailing Address 2509 Acorn Ln.		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : SB17.4265</b>
City Ceres State CA Zip Code 95307	Purpose of Disbursement	
Candidate Name <b>CHAD MATTHEW CONDIT</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 10		

Full Name (Last, First, Middle Initial) <b>B. Chance Condit</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2012
Mailing Address 2509 Acorn Ln.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4271</b>
City Ceres State CA Zip Code 95307	Purpose of Disbursement Salary	
Candidate Name <b>CHAD MATTHEW CONDIT</b>		Category/Type 001
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 10		

Full Name (Last, First, Middle Initial) <b>c. IVC Media</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address 123 Camino dela Reina Ste 202 E		Amount of Each Disbursement this Period 3800.00 <b>Transaction ID : SB17.4272</b>
City San Diego State CA Zip Code 92108	Purpose of Disbursement Website Construction	
Candidate Name <b>CHAD MATTHEW CONDIT</b>		Category/Type 004
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 10		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4340.00
<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 14	
	<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)  
**Chad Condit For Congress**

Full Name (Last, First, Middle Initial) <b>A. San Joaquin County Registra of Voters</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012
Mailing Address 44 N. San Joaquin St. Ste 350		Amount of Each Disbursement this Period 1700.00 <b>Transaction ID : SB17.4263</b>
City Stockton State CA Zip Code 95202	Purpose of Disbursement 001 Category/Type	
Candidate Name <b>Chad Condit For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 10		

Full Name (Last, First, Middle Initial) <b>B. Stanislaus County Election Office</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address 1021 I St. Ste 101		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.4259</b>
City Modesto State CA Zip Code 95354	Purpose of Disbursement Filing Fee 001 Category/Type	
Candidate Name <b>Chad Condit For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 10		

Full Name (Last, First, Middle Initial) <b>c. Wristbands</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2012
Mailing Address Inernet		Amount of Each Disbursement this Period 490.00 <b>Transaction ID : SB17.4352</b>
City Stafford State TX Zip Code 77477	Purpose of Disbursement Wristbands with message 006 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5190.00
<b>TOTAL</b> This Period (last page this line number only).....	13004.40

**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/10.4123

Chad Condit For Congress

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

[PERSONAL FUNDS]

Election: 2012

CHAD MATTHEW CONDIT

Primary

General

Other (specify) ▼

Mailing Address

2509 ACORN LANE

City

State

ZIP Code

CERES

CA

95301

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 02 /

Y 2012 Y

M /

D /

Y 12/31/2012 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)..... ▶

1740.00

**TOTALS** This Period (last page in this line only)..... ▶

1740.00

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