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Image# 13940025182

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Con	nmittee			Office Use Only
NAME OF COMMITTEE (in	TYPE OR PRI	·	xample: If typin ver the lines.	g, type	12FE4M5	
Chad Condit F	or Congress					
					1 1 1 1	
ADDRESS (number ar	nd street)	Loa Dr.				
Check if di than previo reported. (A	usly Ceres				CA S	95307
2. FEC IDENTIFIC	CATION NUMBER ▼	CITY ▲			STATE A	ZIP CODE
C C005154	94	3. IS THIS REPORT	× NEW	OR	AMEND (A)	STATE ▼ DISTRICT ED CA 10
(a) Quarterly R	REPORT (Choose One) Reports: 5 Quarterly Report (Q1) 5 Quarterly Report (Q2)	(b) 12-Day PR	E-Election Repo Primary (12P Convention ()	General (12	
	er 15 Quarterly Report (Q3)	Election or	M M /	D D /	Y Y Y Y	in the State of
X Januar	y 31 Year-End Report (YE)	(c) 30-Day PO	ST-Election Rep	port for the:		
			General (30G	i)	Runoff (30	R) Special (30S)
Termina	ation Report (TER)	Election or	M M M /	D D /	Y " Y " Y	in the State of
5. Covering Period	M M / D D D 01	7	through	12	31	2012
-	examined this Report and	-	nowledge and	belief it is tr	ue, correct and	complete.
Type or Print Name	of Treasurer Harry Herbe	ert			M ⁻ M	/ D D / Y Y Y Y
Signature of Treasure	er <u>Harry Herbert</u>		[Electronically l	Filed] [Date 01	12 2013
	false, erroneous, or incomp	olete information may	subject the per	son signing	this Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

2012

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2012

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Chad	Condit	For	Congress

Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 2080.00 17700.25 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 2080.00 17700.25 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 2659.00 13914.32 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 2659.00 13914.32 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of -6417.43 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 8740.00 Schedule C and/or Schedule D).....

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)

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Write or Type Committee Name

Chad Condit For Congress

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11. C	ONTRIBUTIONS (other than loans) FROM:				
(a)	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	601.00	15650.00		
	(ii) Unitemized	560.00	2050.25		
	(iii) TOTAL of contributions from individuals	1161.00	17700.25		
(b)	· · · · · · · · · · · · · · · · · · ·	0.00	0.00		
(c)	Other Political Committees (such as PACs)	0.00	0.00		
(d) (e)	TOTAL CONTRIBUTIONS	919.00	0.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	2080.00	17700.25		
	RANSFERS FROM OTHER JTHORIZED COMMITTEES	0.00	0.00		
	DANS:				
(a)	Made or Guaranteed by the Candidate	0.00	1740.00		
(b)		0.00	0.00		
(c)	(add Lines 13(a) and (b))	0.00	1740.00		
	FFSETS TO OPERATING				
	KPENDITURES efunds, Rebates, etc.)	0.00	0.00		
	THER RECEIPTS ividends, Interest, etc.)	0.00	0.00		
11	OTAL RECEIPTS (add Lines (e), 12, 13(c), 14, and 15) arry Total to Line 24, page 4)	2080.00	19440.25		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	2659.00	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
	(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 REFUND (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	2659.00	13914.32
	III. CAS	SH SUMMARY	
23.	CASH ON HAND AT BEGINNING OF	REPORTING PERIOD	-5838.43
24	TOTAL RECEIPTS THIS PERIOD (from	m Line 16, page 3)	2080.00
25.	SUBTOTAL (add Line 23 and Line 24	.)	-3758.43
26.	TOTAL DISBURSEMENTS THIS PERI	OD (from Line 22)	2659.00
27.	CASH ON HAND AT CLOSE OF REP	PORTING PERIOD	-6417.43

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 5 OF 10 (check only one) 11a 11b 11d 11c 12 13a 13b

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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 Full Name (Last, First, Middle Initial) Kimberli Condit Date of Receipt Mailing Address 5600 Arnerich Ct. 10 2012 18 City State Zip Code Transaction ID: SA11AI.4721 CA 95367 Riverbank FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 50.00 Name of Employer Occupation N/A Homemaker Receipt For: 2012 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **Bupinder Dosanjh** Date of Receipt Mailing Address 5949 Roeding Rd. 18 2012 City State Zip Code Transaction ID: SA11AI.4706 Hughson CA 95326 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 101.00 Name of Employer Occupation Farmer Self Employed Receipt For: 2012 Election Cycle-to-Date | Primary General 1101.00 Other (specify) Full Name (Last, First, Middle Initial) Mike Lynch Consulting Date of Receipt Mailing Address 801 10th St. 2012 18 City State Zip Code Transaction ID: SA11AI.4722 CA Modesto 95354 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Receipt For: 2012 Election Cycle-to-Date Primary General Other (specify) 250.00 401.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE 6 OF 10 Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a 13b

ITEMIZED RECEIPTS 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 Full Name (Last, First, Middle Initial) Billy West Date of Receipt Mailing Address 5254 S. Central Ave. 10 2012 18 City State Zip Code Transaction ID: SA11AI.4701 CA 95307 Ceres FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 200.00 Name of Employer Occupation None Retired Receipt For: 2012 Election Cycle-to-Date | Primary General 290.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... 601.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOR LINE NUMBER:				PAGE		7	OF		10	
Use separate schedule(s)	(check only one)										
for each category of the Detailed Summary Page		11a		11b		11c	X	110	d _	_	
Detailed Currinary 1 age		12		13a		13b		14			15

		Dotallog 0	ammary rago		12	13a	13b	14	15
Any information copied from such Reports and Sor for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full) Chad Condit For Congress									
Full Name (Last, First, Middle Initial) CHAD MATTHEW CONDIT Mailing Address 2509 ACORN LANE					Date of	Receipt		2012	Y
City CERES	State CA	Zip Code 95301)	Tı			A11D.4727	2012	
FEC ID number of contributing federal political committee.	С н2	CA10152			Amount	of Each	Receipt this		20
Name of Employer N/A	Occupation	d				,		220.0	00
Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date	7220.00						
Full Name (Last, First, Middle Initial) CHAD MATTHEW CONDIT Mailing Address 2509 ACORN LANE						Receipt			
City	State	Zip Code	e		10	18		2012	
CERES	CA	95301			ansacu	OII ID . 3A	4110.4720		
FEC ID number of contributing federal political committee.	<u> </u>	CA10152			Amount	of Each	Receipt this	s Period 499.0	20
Name of Employer N/A	Occupation Unemploye					,	9	433.0	
Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date	7719.00						
Full Name (Last, First, Middle Initial) CHAD MATTHEW CONDIT					Date of	Receipt			
Mailing Address 2509 ACORN LANE City	State	Zip Code			11	/ D		2012	Y
CERES	CA	95301	-	T	ransact	ion ID : S	A11D.4729		
FEC ID number of contributing federal political committee.	С н2	CA10152			Amount	of Each	Receipt this	s Period	-
Name of Employer N/A	Occupation Unemploye							200.0	00
Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date	7919.00						
SUBTOTAL of Receipts This Page (optional)								919.0	0
TOTAL This Period (last page this line number of								919.0	0

S

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedu for each category of Detailed Summary P	ıle(s) (c the	OR LINE NUMBER: PAGE 8 OF 10 heck only one) X 17
Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Chad Condit For Congress			
Full Name (Last, First, Middle Initial) A. Bank of The West Mailing Address 2501 E. Whitmore Ave.			Date of Disbursement 12 31 2012
City State Ceres CA Purpose of Disbursement Service charges Candidate Name Office Sought: House Disbursement For Senate President President State: District:	: 2012 General	001 Category/ Type	Amount of Each Disbursement this Period 220.00 Transaction ID : SB17.4730
B. Full Name (Last, First, Middle Initial) CHAD MATTHEW CONDIT Mailing Address 2509 ACORN LANE			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State CERES CA Purpose of Disbursement Partial repayment Candidate Name Chad Condit For Congress Office Sought: House Senate President President State CA Disbursement For Primary Other (s	: 2012 General	009 Category/ Type	Amount of Each Disbursement this Period 2439.00 Transaction ID : SB17.4733
State: CA District: 10 Full Name (Last, First, Middle Initial) C. Mailing Address	p Code	Category/ Type	Date of Disbursement M M / D D / Y Y Y Y Amount of Each Disbursement this Period
Office Sought: House Disbursement For Senate Primary President Other (s	General		2650.00

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

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

2659.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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X	13a
	13b

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OF

Detailed Summary Page Transaction ID: SC/10.4123 NAME OF COMMITTEE (In Full) Chad Condit For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary CHAD MATTHEW CONDIT General Mailing Address Other (specify) \blacktriangledown 2509 ACORN LANE City State ZIP Code CA 95301 **CERES** Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1740.00 0.00 1740.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M 02 Ž012 12/31/2012 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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

FOR LINE NUMBER:

PAGE

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X	13a
	13b

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(check only one) Detailed Summary Page Transaction ID: SC/10.4623 NAME OF COMMITTEE (In Full) Chad Condit For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary CHAD MATTHEW CONDIT General Mailing Address Other (specify) 2509 ACORN LANE City State ZIP Code CA 95301 **CERES** Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 7000.00 0.00 7000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 07 ^M06^M Ž012 12/31/2012 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 7000.00 TOTALS This Period (last page in this line only) 8740.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.