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FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For An		rized Comr	_			Office	e Use Only
1. NAME OF COMMITTEE (in	full)	TYPE OR PRIN	IT ▼		mple: If typing r the lines.	g, type	12FE4M	5	
COMMITTEE	TO EL	ECT JEREM	y roi	DGERS					ı
ADDRESS (number ar	nd street)	PO BOX 8125	61 						
Check if di	fferent								
than previo	usly	boca raton					FL [	33481	
2. <b>FEC IDENTIFIC</b>	CATION	NUMBER ▼		CITY			STATE A		ZIP CODE A STATE ▼ DISTRICT
C C0056086	62			IS THIS REPORT	NEW (N)	OR	AMENI (A)	DED	FL
			1						
4. TYPE OF RE		Choose One)	(b)	12-Day <b>PRE</b> -	Election Repo	rt for the:			
(a) Quarterly R					Primary (12P)		General (	12G)	Runoff (12R)
April 15	Quarterl	y Report (Q1)		П	Convention (	12C)	Special (1	12S)	
July 15	Quarterly	/ Report (Q2)						,	
Octobe	r 15 Quai	rterly Report (Q3)		Election on	M - M /	D D /	V - V - V - V		in the State of
January	/ 31 Year-	-End Report (YE)	(c) ;	30-Day <b>POS</b> 1	-Election Rep	ort for the:			
					General (30G		Runoff (3	0R)	Special (30S)
<b>X</b> Termina	ation Repo	ort (TER)		Election on	M M /	D D /	Y		in the State of
5. Covering Period	N	04 / 01		Y Y Y Y 2014	through	M M 07	/ D D /		y
I certify that I have e	examined	this Report and t	o the be	est of my kno	owledge and l	pelief it is tro	ue, correct an	d com	nplete.
Type or Print Name	of Treasu	rer amanda rod	gers						
Signature of Treasure	er <i>a</i> r	manda rodgers		ı	Electronically I	<u>Filed]</u>	oate 07	/	16 Y Y Y Y Y Y Y Z014
NOTE: Submission of	false, err	oneous, or incomp	ete infor	rmation may s	ubject the per	son signing t	his Report to t	the per	nalties of 2 U.S.C. §437g.
Office Use Only									EC FORM 3 Revised 02/2003)

#### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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I LC FOITH 3 (Hevised 02/2003

Write or Type Committee Name

#### COMMITTEE TO ELECT JEREMY RODGERS

07 16 2014 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 390.00 1560.00 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 1000.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) -610.00 1560.00 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 481.44 265.00 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 481.44 265.00 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 703.56 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 0.00 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

### COMMITTEE TO ELECT JEREMY RODGERS

Report Covering the Period: From: 04 01 2014 To: 07 16 2014

	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	390.00	1295.00		
	(iii) TOTAL of contributions from individuals	390.00	1295.00		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	0.00		
	(d) The Candidate	0.00	265.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	390.00	1560.00		
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3.	LOANS:				
	(a) Made or Guaranteed by the Candidate	0.00	25000.00		
	(b) All Other Loans	0.00	0.00		
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	25000.00		
14.	OFFSETS TO OPERATING				
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00		
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	390.00	26560.00		

#### **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	481.44	265.00		
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00		
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed	24500.00	0.00		
	by the Candidate(b) Of All Other Loans	0.00	0.00		
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	24500.00	0.00		
20.	REFUNDS OF CONTRIBUTIONS TO:  (a) Individuals/Persons Other				
	Than Political Committees	1000.00	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))	1000.00	0.00		
21.	OTHER DISBURSEMENTS	0.00	0.00		
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	25981.44	265.00		
	III. CASH SU	JMMARY			
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	26295.00		
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	390.00		
25.	SUBTOTAL (add Line 23 and Line 24)		26685.00		
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	25981.44		
27.	7. CASH ON HAND AT CLOSE OF REPORTING PERIOD 703.56 (subtract Line 26 from Line 25)				

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#### : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F3T Transaction ID:

Did not make filing. Returning most donations and repaying candidate loan.

Form/Schedule: Transaction ID:

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

	FOR LINE NUMBER:				PAGE	6	OF	12
Use separate schedule(s)	(check on	ly one)						
for each category of the Detailed Summary Page	X	17		18		19a		19b
Detailed Suffillary Fage		20a		20b		20c		21

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) COMMITTEE TO ELECT JEREMY RODGERS Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT JEREMY RODGERS Date of Disbursement 2014 Mailing Address PO BOX 812561 09 City State Zip Code Amount of Each Disbursement this Period FΙ boca raton 33481 Purpose of Disbursement 400.00 **BRRC** Dinner/Table Transaction ID: SB17.4177 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) President FL State: District: Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT JEREMY RODGERS Date of Disbursement Mailing Address PO BOX 812561 04 16 2014 City Zip Code State Amount of Each Disbursement this Period FL 33481 boca raton 25.44 Purpose of Disbursement Transaction ID: SB17.4178 Candidate Name Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: FL District: Full Name (Last, First, Middle Initial) C. COMMITTEE TO ELECT JEREMY RODGERS Date of Disbursement Mailing Address PO BOX 812561 04 2014 25 City Zip Code State Amount of Each Disbursement this Period boca raton FL 33481 56.00 Purpose of Disbursement Transaction fees, YTD Transaction ID : SB17.4179 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: FL District: 22 481.44 SUBTOTAL of Disbursements This Page (optional).....

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

481.44

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 12 (check only one)  17 18 X 19a 19b 20a 20b 20c 21
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		y person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT JEREMY RO	• •	
Full Name (Last, First, Middle Initial)  A. COMMITTEE TO ELECT JEREMY RO	DGERS	Date of Disbursement
Mailing Address PO BOX 812561		07 16 2014
City State boca raton FL  Purpose of Disbursement	Zip Code 33481	Amount of Each Disbursement this Period 20000.00
20,000 of 25,000 loan  Candidate Name	009 Category	Transaction ID : SB19A.4182
State: FL District: 22	or:	
Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT JEREMY RO  Mailing Address PO BOX 812561	DGERS	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 boca raton FL	Zip Code 33481	Amount of Each Disbursement this Period
Purpose of Disbursement 4500 of 5000 outstanding  Candidate Name	4500.00  Transaction ID : SB19A.4203	
Office Sought:  Office Sought:  Senate President  State: FL  District: 22  Disbursement F  Primal Other	or:	
Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		M M / D D / Y M Y M Y
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Category Type	y/
Office Sought:  House  Senate  President  Disbursement F  Primal  Other		
State: District:		
SUBTOTAL of Disbursements This Page (optional)		24500.00

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

24500.00

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE NUM	PAGE	8	OF	12	
Use separate schedule(s)	(check only one	)				
for each category of the Detailed Summary Page	17	18		19a		19b
Detailed Summary Page	<b>X</b> 20a	201	b	20c		21

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) COMMITTEE TO ELECT JEREMY RODGERS Full Name (Last, First, Middle Initial) Date of Disbursement Judith Welker 2014 Mailing Address 16 City State Zip Code Amount of Each Disbursement this Period 200.00 Purpose of Disbursement Transaction ID: SB20A.4187 Candidate Name Category/ Type [MEMO ITEM] Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate General Primary President Other (specify) State: District: 0.00 SUBTOTAL of Disbursements This Page (optional)..... 0.00

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

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: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: SB20A Transaction ID: SB20A.4187

100 Last cycle, 100 this cycle

Form/Schedule: Transaction ID:

### SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

10

×	13a
	13h

12

**LOANS** (check only one) Detailed Summary Page Transaction ID: SC/10.4100 NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT JEREMY RODGERS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary COMMITTEE TO ELECT JEREMY RODGERS General Mailing Address Other (specify)  $\blacktriangledown$ PO BOX 812561 City State ZIP Code FL 33481 boca raton Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 5000.00 4500.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 03<sup>M</sup> 20 ž014 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 ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 0.00 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.

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#### : 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DC FHZ'G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: SC/10 Transaction ID : SC/10.4100

Forgiving any remaining balance after refunds and settling, approximately: (Current loan amount of 500.00 from a balance of 500.00 has been forgiven)

Form/Schedule: Transaction ID:

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

12

X	13a
	13h

12

Detailed Summary Page Transaction ID: SC/10.4099 NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT JEREMY RODGERS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary COMMITTEE TO ELECT JEREMY RODGERS General Mailing Address Other (specify)  $\blacktriangledown$ PO BOX 812561 City State ZIP Code FL 33481 boca raton Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 20000.00 20000.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 03<sup>M</sup> <sup>D</sup>30 ž014 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 ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 0.00 TOTALS This Period (last page in this line only) ...... 0.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.