

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

Francisco For Congress

ADDRESS (number and street)

2407 Anacapa Street

Check if different than previously reported. (ACC)

Santa Barbara

CA

93105

2. FEC IDENTIFICATION NUMBER ▼

C C00551721

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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

through

M M /

D D /

Y Y Y Y

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 Chrissie Hastie

Signature of Treasurer Chrissie Hastie

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Francisco 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))....	0.00	0.00
(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)).....	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1396.25	1859.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	285.00	285.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1111.25	1574.52
8. Cash on Hand at Close of Reporting Period (from Line 27).....	134.28	
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).....	71584.60	

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

Francisco 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.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(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))..	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	750.00	1750.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	750.00	1750.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	285.00	285.00
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)..... ▶		
	1035.00	2035.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1396.25	1859.52
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) ►	1396.25	1859.52

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	495.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1035.00
25. SUBTOTAL (add Line 23 and Line 24).....	1530.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1396.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	134.28

**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 15
	<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)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Dale Francisco

Mailing Address PO Box 22007

City Santa Barbara State CA Zip Code 93121-

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

Name of Employer Candidate Occupation Candidate

Receipt For: 2016
 Primary General
 Other (specify) Primary 2014

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : 50409.C817

Amount of Each Receipt this Period
750.00

Loans Made/Guaranteed by Cand.

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).....

750.00

750.00

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

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NAME OF COMMITTEE (In Full)
Francisco For Congress

A. Full Name (Last, First, Middle Initial)
Rachel Kim

Mailing Address 227 Mesa Verde Drive

City Santa Barbara State CA Zip Code 93110-

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) Primary 2014

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2015

Transaction ID : 50415.C818

Amount of Each Receipt this Period
 285.00

Offsets to Operating Expenditu

Note:Voiced Check

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).....

285.00

285.00

**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 15	
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. Hyatt Hotels		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 345 Stockton Street		Amount of Each Disbursement this Period 188.75
City San Francisco	State CA	
Zip Code 94108-	Purpose of Disbursement Travel	Transaction ID : 50127.E1078
Candidate Name	Category/Type	
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)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) B. Hyatt Hotels		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address 345 Stockton Street		Amount of Each Disbursement this Period 27.60
City San Francisco	State CA	
Zip Code 94108-	Purpose of Disbursement Travel	Transaction ID : 50409.E1083
Candidate Name	Category/Type	
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)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) c. Hyatt Hotels		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address 345 Stockton Street		Amount of Each Disbursement this Period 475.02
City San Francisco	State CA	
Zip Code 94108-	Purpose of Disbursement Travel	Transaction ID : 50409.E1085
Candidate Name	Category/Type	
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)	TRAVEL
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	691.37
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 8 OF 15			
	<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)
Francisco For Congress

Full Name (Last, First, Middle Initial) A. California Republican Party			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address 1903 West Magnolia Boulevard			Amount of Each Disbursement this Period 205.00
City Burbank	State CA	Zip Code 91506-	
Purpose of Disbursement Mtg Registration Fees		Category/ Type	Transaction ID : 50409.E1084
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)		MTG REGISTRATION FEES
State: District:			

Full Name (Last, First, Middle Initial) B. USPS			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 836 Anacapa Street			Amount of Each Disbursement this Period 203.00
City Santa Barbara	State CA	Zip Code 93102-	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : 50409.E1086
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)		POSTAGE
State: District:			

Full Name (Last, First, Middle Initial) C.			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	
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:			

SUBTOTAL of Disbursements This Page (optional).....	408.00
TOTAL This Period (last page this line number only).....	1099.37

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Francisco For Congress** Transaction ID : **LS40521.C724**

LOAN SOURCE Full Name (Last, First, Middle Initial) Dale Francisco	[PERSONAL FUNDS]	Election: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2014
Mailing Address PO Box 22007		

City	State	ZIP Code
Santa Barbara	CA	93121-

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
32000.00	19000.00	13000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 24 / Y 2014	M M / D D / ONDEMAND	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).....	▶	13000.00
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)
Francisco For Congress

Transaction ID : LS40712.C809

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

Dale Francisco

[PERSONAL FUNDS]

Election: 2016

Primary
 General
 Other (specify) ▼
Primary 2014

Mailing Address
PO Box 22007

City State ZIP Code
Santa Barbara CA 93121-

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
21852.48	0.00	21852.48

TERMS

Date Incurred: M 05 / D 15 / Y 2014
 Date Due: M M / D D / Y ONDEMAND
 Interest Rate: 0.00 % (apr)
 Secured: 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).....	▶	21852.48
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) **Francisco For Congress** Transaction ID : **LS50409.C817**

LOAN SOURCE Full Name (Last, First, Middle Initial) Dale Francisco	[PERSONAL FUNDS]	Election: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2014
Mailing Address PO Box 22007		

City	State	ZIP Code
Santa Barbara	CA	93121-

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3350.00	0.00	3350.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
09 / 11 / 2014	ONDEMAND	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).....	3350.00
TOTALS This Period (last page in this line only).....	38202.48

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Francisco For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Red Rock Strategies

Mailing Address 9500 East Flamingo #203

City State Zip Code
Las Vegas NV 89147-

Nature of Debt (Purpose):
Consulting Management

Outstanding Balance Beginning This Period **Transaction ID : LS40710.E1045**
14500.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 14500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Red Rock Strategies

Mailing Address 9500 East Flamingo #203

City State Zip Code
Las Vegas NV 89147-

Nature of Debt (Purpose):
Media

Outstanding Balance Beginning This Period **Transaction ID : LS40522.E985**
6150.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 6150.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Red Rock Strategies

Mailing Address 9500 East Flamingo #203

City State Zip Code
Las Vegas NV 89147-

Nature of Debt (Purpose):
Travel

Outstanding Balance Beginning This Period **Transaction ID : LS40415.E910**
234.56

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 234.56

1) SUBTOTALS This Period This Page (optional)	▶	20884.56
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Francisco For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Red Rock Strategies

Nature of Debt (Purpose):
Travel

Mailing Address 9500 East Flamingo #203

City State Zip Code
Las Vegas NV 89147-

Outstanding Balance Beginning This Period

3419.54

Transaction ID : LS40710.E1046

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3419.54

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Red Rock Strategies

Nature of Debt (Purpose):
Data Lists

Mailing Address 9500 East Flamingo #203

City State Zip Code
Las Vegas NV 89147-

Outstanding Balance Beginning This Period

54.49

Transaction ID : LS40710.E1047

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

54.49

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
In Compliance Inc.

Nature of Debt (Purpose):
Consulting Compliance

Mailing Address PO Box 751271

City State Zip Code
Las Vegas NV 89136-

Outstanding Balance Beginning This Period

4950.00

Transaction ID : LS40415.E911

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4950.00

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

8424.03

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Francisco For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor In Compliance Inc.	Nature of Debt (Purpose): Compliance Consulting
Mailing Address PO Box 751271	
City State Zip Code Las Vegas NV 89136-	

Outstanding Balance Beginning This Period 2000.00	Transaction ID : LS50415.E1089	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor In Compliance Inc.	Nature of Debt (Purpose): Office Supplies
Mailing Address PO Box 751271	
City State Zip Code Las Vegas NV 89136-	

Outstanding Balance Beginning This Period 23.78	Transaction ID : LS40710.E1050	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 23.78

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor In Compliance Inc.	Nature of Debt (Purpose): Printing
Mailing Address PO Box 751271	
City State Zip Code Las Vegas NV 89136-	

Outstanding Balance Beginning This Period 2.00	Transaction ID : LS40415.E912	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2.00

1) SUBTOTALS This Period This Page (optional)	3525.78
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Francisco For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
In Compliance Inc.

Mailing Address PO Box 751271

City State Zip Code
Las Vegas NV 89136-

Nature of Debt (Purpose):
Printing

Outstanding Balance Beginning This Period **Transaction ID : LS40710.E1049**
17.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 17.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
In Compliance Inc.

Mailing Address PO Box 751271

City State Zip Code
Las Vegas NV 89136-

Nature of Debt (Purpose):
Shipping

Outstanding Balance Beginning This Period **Transaction ID : LS40415.E913**
45.75

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 45.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Prosper Group

Mailing Address 435 East Main Street #250

City State Zip Code
Greenwood IN 46143-

Nature of Debt (Purpose):
Email Svcs

Outstanding Balance Beginning This Period **Transaction ID : LS40710.E1048**
485.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 485.00

1) SUBTOTALS This Period This Page (optional)	547.75
2) TOTALS This Period (last page this line number only)	33382.12
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	38202.48
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	71584.60