

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
FEC MAIL CENTER
2016 APR -7 AM 9:26
Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. **12FE4M5**
LAMAR STERNAD FOR CONGRESS

ADDRESS (number and street) **19790 SW 101 AVENUE**
 Check if different than previously reported. (ACC) **CUTLER BAY FL 33157-8607**

2. **FEC IDENTIFICATION NUMBER** **C 00505529**
CITY STATE ZIP CODE STATE DISTRICT
FL 26
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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 **MM/DD/YYYY** in the State of **FL**
 (c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
 Election on **MM/DD/YYYY** in the State of **FL**

5. Covering Period **01/01/2016** through **03/31/2016**

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 **JUSTIN LAMAR STERNAD**
 Signature of Treasurer  Date **04/01/2016**

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

NOT TO BE ON BOTTOM

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period: From:

01 / 01 / 2016

To:

03 / 31 / 2016

	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))	2.94	80.84
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	2.94	80.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2.94	80.84
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	2.94	80.84
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
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)	0.00	

NON-PROFIT ORGANIZATION

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)

Page 3

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period: From: 01 / 01 / 2016 To: 03 / 31 / 2016

NON-FEDERAL CAMPAIGN FINANCING

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)		
(ii) Unitemized		
(iii) TOTAL of contributions from individuals		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) The Candidate	2.94	80.84
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) ..	2.94	80.84
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
(b) All Other Loans		
(c) TOTAL LOANS (add Lines 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	2.94	80.84

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	2.94	80.84
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2.94	80.84

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2.94
25. SUBTOTAL (add Line 23 and Line 24).....	2.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2.94
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

**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 5 OF 6		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)
LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STERNAD, JUSTIN L.		Date of Receipt 01 / 08 / 2016
Mailing Address 19790 SW 101 AVENUE		Amount of Each Receipt this Period 1.47
City CUTLER BAY	State Zip Code FL 33157-8607	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 79.37
Name of Employer CAMBEAN HOSPITALITY	Occupation HOTEL AUDITOR	
Receipt For: OPEN COMMITTEE 2012 CYCLE <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) B. STERNAD, JUSTIN L.		Date of Receipt 01 / 08 / 2016
Mailing Address 19790 SW 101 AVENUE		Amount of Each Receipt this Period 1.47
City CUTLER BAY	State Zip Code FL 33157-8607	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.84
Name of Employer CAMBEAN HOSPITALITY	Occupation HOTEL AUDITOR	
Receipt For: OPEN COMMITTEE 2012 CYCLE <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	
TOTAL This Period (last page this line number only).....	2.94

11010100001000011000

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 6
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address
1300 WASHINGTON AVENUE

City **MIAMI BEACH** State **FL** Zip Code **33139**

Purpose of Disbursement
POSTAGE

Candidate Name
JUSTIN LAMAR STERNAD

Office Sought: House Senate President

Disbursement For: OPEN COMMITTEE 2012 CYCLE
 Primary General Other (specify)

State: **FL** District: **26**

Date of Disbursement: **01 / 08 / 2016**

Amount of Each Disbursement this Period: **1.47**

Category/Type: **001**

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address
1300 WASHINGTON AVENUE

City **MIAMI BEACH** State **FL** Zip Code **33139**

Purpose of Disbursement
POSTAGE

Candidate Name
JUSTIN LAMAR STERNAD

Office Sought: House Senate President

Disbursement For: OPEN COMMITTEE 2012 CYCLE
 Primary General Other (specify)

State: **FL** District: **26**

Date of Disbursement: **01 / 08 / 2016**

Amount of Each Disbursement this Period: **1.47**

Category/Type: **001**

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

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

TOTAL This Period (last page this line number only)..... **2.94**

2010-01-01 01:00:00

Justin Sternad
19790 SW 101 Avenue
Cuder Bay, FL 33157

1-0N1-0000 1W0 1V0 1B0 10H0N

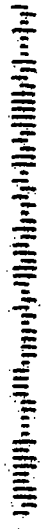
MIAMI FL 331

01 APR 2016 PM 5



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FEDERAL ELECTION COMMISSION
999 E Street, NW
Washington, DC 20463



20463

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt
4/1/16 4/7/16

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


 PREPARER

4/7/16
 DATE PREPARED

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