

# 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

Tony Amador for Congress

ADDRESS (number and street) 8001 Irvine Center Drive, #400

Check if different than previously reported. (ACC)

Irvine

CA

92618

2. **FEC IDENTIFICATION NUMBER** ▼

C C00553289

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA

09

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 06 / 03 / 2014 in the State of CA

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

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

Election on / / in the State of

5. Covering Period

04 / 01 / 2014 through 05 / 14 / 2014

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 Jen Slater

Signature of Treasurer Jen Slater

[Electronically Filed]

Date

05 / 20 / 2014

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

FEC Form 3 (Revised 02/2003)

PAGE 2 / 22

Write or Type Committee Name

**Tony Amador for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	4

	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))....	15320.51	23315.51
(b) Total Contribution Refunds (from Line 20(d)) .....	100.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15220.51	23215.51
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	10068.03	17015.67
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	17.02
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	10068.03	16998.65
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>		
	10233.93	
<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>		
	8043.25	

**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

**Tony Amador for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 05 / 14 / 2014

<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).....	12800.51	16550.51
(ii) Unitemized.....	2520.00	5565.00
(iii) TOTAL of contributions from individuals ▶	15320.51	22115.51
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	1200.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15320.51	23315.51
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	4000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	4000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	17.02
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	17.07
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	15320.51	27349.60

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	10068.03	17015.67
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 .....	100.00	100.00
(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)).....	100.00	100.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	10168.03	17115.67

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5081.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15320.51
25. SUBTOTAL (add Line 23 and Line 24).....	20401.96
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10168.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10233.93

**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 22
	<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)  
**Tony Amador for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nicole Kololli**

Mailing Address 1984 Cedar Bench Dr

City South Weber State UT Zip Code 84405

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 08 / 2014

**Transaction ID : INCA91**

Amount of Each Receipt this Period  
 200.00

**B.** Full Name (Last, First, Middle Initial)  
**Phil Lenser**

Mailing Address 11 Ramblewood Way

City Woodbridge State CA Zip Code 95258

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

Name of Employer Edward Jones Occupation Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 08 / 2014

**Transaction ID : INCA90**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Sherry Cotta**

Mailing Address 9414 Kost Rd

City Galt State CA Zip Code 95632

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

Name of Employer Rhythm & Bluberries Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 10 / 2014

**Transaction ID : INCA97**

Amount of Each Receipt this Period  
 250.00

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

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

700.00

**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 22
	<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)  
**Tony Amador for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joaquin Jauregui**

Mailing Address 3825 W Anthem Way, #2038

City Anthem	State AZ	Zip Code 85086
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 10 / 2014

**Transaction ID : INCA96**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Demetrio Candia**

Mailing Address 1010 1st St

City Ogden	State UT	Zip Code 84404
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : INCA101**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Susan Vander Schaaf**

Mailing Address 12727 Murphy Rd

City Escalon	State CA	Zip Code 95320
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FEC ID number of contributing federal political committee. **C**

Name of Employer Schaaf Dairy	Occupation Farmer
----------------------------------	----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.51

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 15 / 2014

**Transaction ID : NONA155**

Amount of Each Receipt this Period  
100.00  
Event Room Rental Fee

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

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

1350.00

**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 22
	<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)  
**Tony Amador for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ruth L. Montoya**

Mailing Address 8125 Marcy Ave

City Springfield State VA Zip Code 22152

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

Name of Employer Occupation Secretary

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : INCA105**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Susan Vander Schaaf**

Mailing Address 12727 Murphy Rd

City Escalon State CA Zip Code 95320

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

Name of Employer Occupation Farmer

Schaaf Dairy

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : NONA156**

Amount of Each Receipt this Period  
 410.51

Invite Printing & Mailing

**C.** Full Name (Last, First, Middle Initial)  
**Frank C. Alegre**

Mailing Address 1140 Vienna Dr

City Lodi State CA Zip Code 95242

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

Name of Employer Occupation Retired

None

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2014

**Transaction ID : INCA113**

Amount of Each Receipt this Period  
 200.00

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

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

1110.51

**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 22
	<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)  
**Tony Amador for Congress**

Full Name (Last, First, Middle Initial) <b>David Lopez</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 301 Hemphill Way		<b>Transaction ID : INCA114</b>
City Roseville	State CA	
Zip Code 95678		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Fred A. Douma</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 470 Laurelwood Ln		<b>Transaction ID : INCA121</b>
City Ripon	State CA	
Zip Code 95366		Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Fred A Douma Dairy	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) <b>Charles T. Munger Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 1429 Hamilton Ave		<b>Transaction ID : INCA122</b>
City Palo Alto	State CA	
Zip Code 94301		Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Charles T. Munger, Jr.	Occupation Physicist	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5700.00
<b>TOTAL</b> This Period (last page this line number only).....	



**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 22
	<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)  
**Tony Amador for Congress**

Full Name (Last, First, Middle Initial) <b>A. Thomas J. Wicke</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 29 / 2014	
Mailing Address 20750 Ventura Blvd, #400		<b>Transaction ID : INCA120</b>	
City Woodland Hills	State CA	Zip Code 91364	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Lewis & Marenstein	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Adolfo Amador</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 2311 E Campus Dr		<b>Transaction ID : INCA125</b>	
City Salt Lake City	State UT	Zip Code 84121	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Sara Amador</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 2311 E Campus Dr		<b>Transaction ID : INCA130</b>	
City Salt Lake City	State UT	Zip Code 84121	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	1100.00

**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 22
	<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)  
**Tony Amador for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Vander Schaaf**

Mailing Address 12727 Murphy Rd

City Escalon State CA Zip Code 95320

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

Name of Employer Schaaf Dairy Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2250.51**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 01 / 2014**

**Transaction ID : NONA157**

Amount of Each Receipt this Period  
**560.00**

Event Catering Costs

**B.** Full Name (Last, First, Middle Initial)  
**Susan Vander Schaaf**

Mailing Address 12727 Murphy Rd

City Escalon State CA Zip Code 95320

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

Name of Employer Schaaf Dairy Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2250.51**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 01 / 2014**

**Transaction ID : INCA124**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**William Filios**

Mailing Address 5348 Saint Andrews Dr

City Stockton State CA Zip Code 95219

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

Name of Employer Filios Holdings, Inc Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 06 / 2014**

**Transaction ID : INCA142**

Amount of Each Receipt this Period  
**250.00**

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

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

**1810.00**

**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 11 OF 22
	<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)  
**Tony Amador for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeryl R. Fry Jr.**

Mailing Address 12495 N West Ln

City Lodi State CA Zip Code 95240

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

Name of Employer Jeryl R Fry, Jr. Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : INCA148**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Jennifer McDonald**

Mailing Address 624 W Conejo Ave

City Mountain House State CA Zip Code 05391

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : INCA144**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 624 W Conejo Ave

City Mountain House State CA Zip Code 95391

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

Name of Employer Silego Occupation VP Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : INCA145**

Amount of Each Receipt this Period  
 250.00

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

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

800.00

**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 12 OF 22
	<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)  
**Tony Amador for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rhonda Nunez**

Mailing Address 11351 Bubb Rd

City Cupertino State CA Zip Code 95014

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

Name of Employer State Of California Occupation Tax Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **261.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : INCA150**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Susan Vander Schaaf**

Mailing Address 12727 Murphy Rd

City Escalon State CA Zip Code 95320

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

Name of Employer Schaaf Dairy Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2250.51**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : NONA158**

Amount of Each Receipt this Period  
**80.00**

Email Blast Costs

**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).....

**230.00**

**12800.51**

**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 22	
	<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)  
**Tony Amador for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Compliance Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 8001 Irvine Center Drive, #400		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : EXPB82</b>
City Irvine	State CA	
Zip Code 92618	Purpose of Disbursement Financial Analyst	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. eFundraising Connections</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 2131 Capitol Ave, #306		Amount of Each Disbursement this Period 1.90 <b>Transaction ID : EXPB89</b>
City Sacramento	State CA	
Zip Code 95816	Purpose of Disbursement Credit Card Processing Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Sierra Office Supply &amp; Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 9950 Horn Road, Suite 5		Amount of Each Disbursement this Period 1455.00 <b>Transaction ID : EXPB109</b>
City Sacramento	State CA	
Zip Code 95827	Purpose of Disbursement Printing Costs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2206.90
<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 14 OF 22	
	<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)  
**Tony Amador for Congress**

Full Name (Last, First, Middle Initial) <b>A. Susan Vander Schaaf</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 12727 Murphy Rd		Amount of Each Disbursement this Period 100.00
City Escalon State CA Zip Code 95320	Purpose of Disbursement Event Room Rental Fee	
Candidate Name	Category/Type	<b>Transaction ID : NONB155</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 31531 Santa Margarita Pkwy		Amount of Each Disbursement this Period 12.00
City Rcho Sta Margarita State CA Zip Code 92688	Purpose of Disbursement Bank Fee	
Candidate Name	Category/Type 001	<b>Transaction ID : EXPB111</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. eFundraising Connections</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2014
Mailing Address 2131 Capitol Ave, #306		Amount of Each Disbursement this Period 15.00
City Sacramento State CA Zip Code 95816	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type 001	<b>Transaction ID : EXPB108</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	127.00
<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 15 OF 22			
	<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)  
**Tony Amador for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pasos Vineyards</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 12470 Locke Rd			Amount of Each Disbursement this Period 210.00 <b>Transaction ID : EXPB107</b>
City Lockeford	State CA	Zip Code 95237	
Purpose of Disbursement Event Venue Costs		Category/ Type 001	
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: _____		

Full Name (Last, First, Middle Initial) <b>B. Susan Vander Schaaf</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 12727 Murphy Rd			Amount of Each Disbursement this Period 410.51 <b>Transaction ID : NONB156</b>
City Escalon	State CA	Zip Code 95320	
Purpose of Disbursement Invite Printing & Mailing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Dane &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 5059 Long View Dr			Amount of Each Disbursement this Period 1254.40 <b>Transaction ID : EXPB115</b>
City Las Vegas	State NV	Zip Code 89120	
Purpose of Disbursement Survey Costs		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1874.91
<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 16 OF 22			
	<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)  
**Tony Amador for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Compliance Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 8001 Irvine Center Drive, #400		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : EXPB116</b>
City Irvine	State CA	
Zip Code 92618	Purpose of Disbursement Financial Analyst	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Precision Signz</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 1055 Valley Drive		Amount of Each Disbursement this Period 1685.50 <b>Transaction ID : EXPB123</b>
City Riverdale	State IA	
Zip Code 52722	Purpose of Disbursement Outdoor Signs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Susan Vander Schaaf</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 12727 Murphy Rd		Amount of Each Disbursement this Period 560.00 <b>Transaction ID : NONB157</b>
City Escalon	State CA	
Zip Code 95320	Purpose of Disbursement Event Catering Costs	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2995.50
<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 17 OF 22			
	<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)  
**Tony Amador for Congress**

Full Name (Last, First, Middle Initial) <b>A. 3AM Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1821 Concord Avenue		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : EXPB140</b>
City Stockton	State CA	
Zip Code 95204	Purpose of Disbursement Web Development	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. 3AM Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1821 Concord Avenue		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : EXPB138</b>
City Stockton	State CA	
Zip Code 95204	Purpose of Disbursement Printing Costs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. eFundraising Connections</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 2131 Capitol Ave, #306		Amount of Each Disbursement this Period 21.25 <b>Transaction ID : EXPB143</b>
City Sacramento	State CA	
Zip Code 95816	Purpose of Disbursement Credit Card Processing Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1821.25
<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 18 OF 22			
	<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)  
**Tony Amador for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sierra Office Supply &amp; Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014		
Mailing Address 9950 Horn Road, Suite 5			Amount of Each Disbursement this Period 962.47		
City Sacramento	State CA	Zip Code 95827	Transaction ID : EXPB151		
Purpose of Disbursement Printing Costs		Category/ Type 001			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Susan Vander Schaaf</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014		
Mailing Address 12727 Murphy Rd			Amount of Each Disbursement this Period 80.00		
City Escalon	State CA	Zip Code 95320	Transaction ID : NONB158		
Purpose of Disbursement Email Blast Costs		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1042.47
<b>TOTAL</b> This Period (last page this line number only).....	10068.03

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC3**  
 Tony Amador for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Antonio C. Amador - Personal Funds	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2062 Henderson Way	

City	State	ZIP Code
Lodi	CA	95242

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4000.00	0.00	4000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 05 / Y 2013	M / D / Y . None	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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	4000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	4000.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10  
Transaction ID : PAYC3  
Loan

Form/Schedule:  
Transaction ID:

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Tony Amador for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Antonio C. Amador - Personal Funds</b>		Nature of Debt (Purpose): Filing Fees
Mailing Address 2062 Henderson Way		
City	State	Zip Code
Lodi	CA	95242

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD48</b>	
<input type="text" value="1300.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1300.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Antonio C. Amador - Personal Funds</b>		Nature of Debt (Purpose): Filing Fees
Mailing Address 2062 Henderson Way		
City	State	Zip Code
Lodi	CA	95242

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD49</b>	
<input type="text" value="910.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="910.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Antonio C. Amador - Personal Funds</b>		Nature of Debt (Purpose): Filing Fees
Mailing Address 2062 Henderson Way		
City	State	Zip Code
Lodi	CA	95242

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD50</b>	
<input type="text" value="300.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="300.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="2510.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

**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)

**Tony Amador for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Antonio C. Amador - Personal Funds**

Nature of Debt (Purpose):  
Outdoor Signs

Mailing Address 2062 Henderson Way

City State Zip Code  
Lodi CA 95242

Outstanding Balance Beginning This Period

1533.25

Transaction ID : PAYD60

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1533.25

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

Nature of Debt (Purpose):  
Financial Analyst

Mailing Address 8001 Irvine Center Drive, #400

City State Zip Code  
Irvine CA 92618

Outstanding Balance Beginning This Period

750.00

Transaction ID : PAYD29

Amount Incurred This Period

0.00

Payment This Period

750.00

Outstanding Balance at Close of This Period

0.00

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 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) ▶

	1533.25
	4043.25
	4000.00
	8043.25