

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

Justin Fared for Congress

ADDRESS (number and street)

2151 S College Dr Ste 101

Check if different than previously reported. (ACC)

Santa Maria

CA

93455

2. FEC IDENTIFICATION NUMBER ▼

C C00551358

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 Trent Benedetti

Signature of Treasurer Trent Benedetti

[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)

PAGE 2 / 58

Write or Type Committee Name

Justin Fared for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

	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))....	203570.32	383287.60
(b) Total Contribution Refunds (from Line 20(d))	0.00	4100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	203570.32	379187.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	32174.91	375072.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	512.59	10913.55
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	31662.32	364159.34
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	

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

Justin Fared 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).....	7102.49	167191.60
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	7102.49	167191.60
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	19628.17
(d) The Candidate.....	196467.83	196467.83
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	203570.32	383287.60
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	12000.00	197305.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	12000.00	197305.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	512.59	10913.55
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	73.94
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	216082.91	591580.09

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	32174.91	375072.89
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	197305.00	197305.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	197305.00	197305.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	4100.00
(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	4100.00
21. OTHER DISBURSEMENTS	0.00	15102.20
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	229479.91	591580.09

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	13397.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	216082.91
25. SUBTOTAL (add Line 23 and Line 24).....	229479.91
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	229479.91
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 58
	<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)
Justin Fared for Congress

A. Full Name (Last, First, Middle Initial)
Linda C. Taylor Fared

Mailing Address P.O. Box 50509

City Santa Barbara State CA Zip Code 93150

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

Name of Employer Proband Sports Industries Occupation Owner/ CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4645.59**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : PAYA701

Amount of Each Receipt this Period
2045.59

B. Full Name (Last, First, Middle Initial)
Mercury

Mailing Address 250 Greenwich Street, 36th Floor

City New York State NY Zip Code 10007

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5056.90**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 15 / 2014

Transaction ID : PAYA703

Amount of Each Receipt this Period
1247.93

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

Mailing Address 250 Greenwich Street, 36th Floor

City New York State NY Zip Code 10007

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5056.90**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 15 / 2014

Transaction ID : PAYA702

Amount of Each Receipt this Period
3808.97

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

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

7102.49

7102.49

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

Form/Schedule: SA11AI

Transaction ID : PAYA701

see debt settlement plan

Form/Schedule: SA11AI

Transaction ID: PAYA703

see debt settlement plan

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

Form/Schedule: SA11AI

Transaction ID : PAYA702

see debt settlement plan

Form/Schedule:

Transaction ID:

**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 58
	<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)
Justin Fared for Congress

Full Name (Last, First, Middle Initial) A. Justin Fared		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 801 Buena Vista Ave		Transaction ID : PAYA710	
City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation ProBand Sports Industries, Inc Vice President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 393772.83		

Full Name (Last, First, Middle Initial) B. Justin Fared		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 801 Buena Vista Ave		Transaction ID : PAYA705	
City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 50000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation ProBand Sports Industries, Inc Vice President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 393772.83		

Full Name (Last, First, Middle Initial) C. Justin Fared		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 801 Buena Vista Ave		Transaction ID : PAYA709	
City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 20000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation ProBand Sports Industries, Inc Vice President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 393772.83		

SUBTOTAL of Receipts This Page (optional).....	80000.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Form/Schedule: SA11D

Transaction ID : PAYA710

candidate forgives loan

Form/Schedule: SA11D

Transaction ID: PAYA705

candidate forgives loan

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

Form/Schedule: SA11D

Transaction ID : PAYA709

candidate forgives loan

Form/Schedule:

Transaction ID:

**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 58
	<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)
Justin Fared for Congress

Full Name (Last, First, Middle Initial) Justin Fared		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Transaction ID : PAYA711
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer ProBand Sports Industries, Inc	Occupation Vice President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 393772.83	

Full Name (Last, First, Middle Initial) Justin Fared		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Transaction ID : PAYA708
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10305.00
Name of Employer ProBand Sports Industries, Inc	Occupation Vice President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 393772.83	

Full Name (Last, First, Middle Initial) Justin Fared		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Transaction ID : PAYA706
City Santa Barbara	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50000.00
Name of Employer ProBand Sports Industries, Inc	Occupation Vice President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 393772.83	

SUBTOTAL of Receipts This Page (optional).....	62305.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SA11D

Transaction ID : PAYA711

candidate forgives loan

Form/Schedule: SA11D

Transaction ID: PAYA708

candidate forgives loan

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

Form/Schedule: SA11D

Transaction ID : PAYA706

candidate forgives loan

Form/Schedule:

Transaction ID:

**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 14 OF 58
	<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)
Justin Fared for Congress

A. Full Name (Last, First, Middle Initial)
Justin Fared

Mailing Address 801 Buena Vista Ave

City Santa Barbara State CA Zip Code 93108

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

Name of Employer ProBand Sports Industries, Inc Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **393772.83**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : PAYA707

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
Justin Fared

Mailing Address 801 Buena Vista Ave

City Santa Barbara State CA Zip Code 93108

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

Name of Employer ProBand Sports Industries, Inc Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **393772.83**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : PAYA712

Amount of Each Receipt this Period
 49162.83

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).....

54162.83

196467.83

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : PAYA707

candidate forgives loan

Form/Schedule: SA11D

Transaction ID: PAYA712

candidate forgives loan

**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 16 OF 58
	<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	

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NAME OF COMMITTEE (In Full)
Justin Fared for Congress

A. Full Name (Last, First, Middle Initial)
Justin Fared

Mailing Address 801 Buena Vista Ave

City Santa Barbara State CA Zip Code 93108

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

Name of Employer ProBand Sports Industries, Inc Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
393772.83

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 09 / 2014

Transaction ID : PAYA666

Amount of Each Receipt this Period
10000.00

B. Full Name (Last, First, Middle Initial)
Justin Fared

Mailing Address 801 Buena Vista Ave

City Santa Barbara State CA Zip Code 93108

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

Name of Employer ProBand Sports Industries, Inc Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
393772.83

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : PAYA673

Amount of Each Receipt this Period
2000.00

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).....

12000.00

12000.00

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

Form/Schedule: SA13A

Transaction ID : PAYA666

personal funds

Form/Schedule: SA13A

Transaction ID: PAYA673

personal funds

**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 18 OF 58
	<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)
Justin Fared for Congress

A. Full Name (Last, First, Middle Initial)
Cox Communications

Mailing Address PO Box 79172

City Phoenix State AZ Zip Code 85062-9172

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **239.23**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 25 / 2014

Transaction ID : INCA689

Amount of Each Receipt this Period
239.23
 customer refund for account

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).....

239.23

239.23

**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 19 OF 58			
	<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)
Justin Fared for Congress

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address		Amount of Each Disbursement this Period 65.00 Transaction ID : EXPB687
City	State Zip Code	
Purpose of Disbursement website	001 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. Harris Media, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 611 S. Congress Avenue, Ste. 400		Amount of Each Disbursement this Period 1500.00 Transaction ID : EXPB650
City	State Zip Code	
Austin TX 78704		
Purpose of Disbursement media consulting	003 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) c. Harris Media, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 611 S. Congress Avenue, Ste. 400		Amount of Each Disbursement this Period 7029.82 Transaction ID : EXPB652
City	State Zip Code	
Austin TX 78704		
Purpose of Disbursement advertising: facebook/google/nationbuilder fee	003 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:		

SUBTOTAL of Disbursements This Page (optional).....	8594.82
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 20 OF 58	
	<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)
Justin Fared for Congress

A. Love's Towing

Full Name (Last, First, Middle Initial)
Mailing Address 211 E. Haley Street

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement Santa Maria Elks parade

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 08 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : EXPB655

Category/Type: 007

B. Mercury

Full Name (Last, First, Middle Initial)
Mailing Address 250 Greenwich Street, 36th Floor

City New York State NY Zip Code 10007

Purpose of Disbursement media consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 08 / 2014

Amount of Each Disbursement this Period: 3000.00

Transaction ID : EXPB661

Category/Type: 003

c. Toby Emory

Full Name (Last, First, Middle Initial)
Mailing Address 4648 Via Clarice

City Santa Barbara State CA Zip Code 93111

Purpose of Disbursement administrative consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 11 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : EXPB667

Category/Type: 003

SUBTOTAL of Disbursements This Page (optional) 4500.00

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 21 OF 58			
	<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)
Justin Fared for Congress

Full Name (Last, First, Middle Initial)
A. Bank of America

Mailing Address 2060 S. Broadway

City Santa Maria State CA Zip Code 93454

Purpose of Disbursement wire fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 21 / 2014

Amount of Each Disbursement this Period: 25.00

Transaction ID : EXPB688

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. Mercury

Mailing Address 250 Greenwich Street, 36th Floor

City New York State NY Zip Code 10007

Purpose of Disbursement reimburse travel expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 22 / 2014

Amount of Each Disbursement this Period: 1660.92

Transaction ID : EXPB676

Category/Type: 002

Full Name (Last, First, Middle Initial)
c. Mercury

Mailing Address 250 Greenwich Street, 36th Floor

City New York State NY Zip Code 10007

Purpose of Disbursement media consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 22 / 2014

Amount of Each Disbursement this Period: 5000.00

Transaction ID : EXPB678

Category/Type: 003

SUBTOTAL of Disbursements This Page (optional)..... 6685.92

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 22 OF 58			
	<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)
Justin Fared for Congress

Full Name (Last, First, Middle Initial) A. Mercury		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 250 Greenwich Street, 36th Floor		Amount of Each Disbursement this Period 2000.00 Transaction ID : EXPB674
City New York	State NY	
Zip Code 10007	Purpose of Disbursement media consulting	Category/ Type 003
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. Mercury		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 250 Greenwich Street, 36th Floor		Amount of Each Disbursement this Period 148.05 Transaction ID : EXPB680
City New York	State NY	
Zip Code 10007	Purpose of Disbursement reimburse travel exp	Category/ Type 002
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) c. Mercury		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 250 Greenwich Street, 36th Floor		Amount of Each Disbursement this Period 1191.03 Transaction ID : EXPB682
City New York	State NY	
Zip Code 10007	Purpose of Disbursement media consulting	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	3339.03
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 23 OF 58	
	<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)
Justin Fared for Congress

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 2060 S. Broadway		Amount of Each Disbursement this Period 29.95 Transaction ID : EXPB684
City Santa Maria State CA Zip Code 93454	Purpose of Disbursement bank fee 001 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. Benedetti & Associates, CPA, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 2151 S. College DR Ste 101		Amount of Each Disbursement this Period 1827.70 Transaction ID : EXPB671
City Santa Maria State CA Zip Code 93455	Purpose of Disbursement accounting 001 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) c. Google		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address		Amount of Each Disbursement this Period 65.00 Transaction ID : EXPB685
City State Zip Code	Purpose of Disbursement website 001 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:		

SUBTOTAL of Disbursements This Page (optional).....	1922.65
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 24 OF 58			
	<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)
Justin Fareed for Congress

Full Name (Last, First, Middle Initial) A. Linda C. Taylor Fareed		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address P.O. Box 50509		Amount of Each Disbursement this Period 2045.59
City Santa Barbara	State CA	
Zip Code 93150	Purpose of Disbursement Debt Forgiven	Transaction ID : PAYB701
Candidate Name	Category/Type	
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. Linda C. Taylor Fareed		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address P.O. Box 50509		Amount of Each Disbursement this Period 0.00
City Santa Barbara	State CA	
Zip Code 93150	Purpose of Disbursement	Transaction ID : PAYINTB701
Candidate Name	Category/Type	
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) c. Mercury		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 250 Greenwich Street, 36th Floor		Amount of Each Disbursement this Period 3808.97
City New York	State NY	
Zip Code 10007	Purpose of Disbursement Debt Forgiven	Transaction ID : PAYB702
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	5854.56
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : PAYB701

see debt settlement plan

Form/Schedule: SB17

Transaction ID: PAYB702

see debt settlement plan

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 26 OF 58	
	<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)
Justin Fared for Congress

Full Name (Last, First, Middle Initial) A. Mercury		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 250 Greenwich Street, 36th Floor		Amount of Each Disbursement this Period 1247.93
City New York	State NY	
Zip Code 10007	Purpose of Disbursement Debt Forgiven	Transaction ID : PAYB703
Candidate Name	Category/ Type	
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. Mercury		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 250 Greenwich Street, 36th Floor		Amount of Each Disbursement this Period 0.00
City New York	State NY	
Zip Code 10007	Purpose of Disbursement	Transaction ID : PAYINTB702
Candidate Name	Category/ Type	
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) c. Mercury		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 250 Greenwich Street, 36th Floor		Amount of Each Disbursement this Period 0.00
City New York	State NY	
Zip Code 10007	Purpose of Disbursement	Transaction ID : PAYINTB703
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	1247.93
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : PAYB703

see debt settlement plan

Form/Schedule:

Transaction ID:

**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 28 OF 58	
	<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)
Justin Fareed for Congress

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 2060 S. Broadway		Amount of Each Disbursement this Period 29.95
City Santa Maria State CA Zip Code 93454	Purpose of Disbursement monthly bank fee	
Candidate Name		Transaction ID : EXPB690
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Justin Fareed		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 0.00
City Santa Barbara State CA Zip Code 93108	Purpose of Disbursement	
Candidate Name Justin Fareed		Transaction ID : PAYINTB711
Office Sought: <input checked="" 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: CA District: 24	Category/Type	

Full Name (Last, First, Middle Initial) c. Justin Fareed		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 0.00
City Santa Barbara State CA Zip Code 93108	Purpose of Disbursement	
Candidate Name Justin Fareed		Transaction ID : PAYINTB712
Office Sought: <input checked="" 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: CA District: 24	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	29.95
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 29 OF 58	
	<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)
Justin Fared for Congress

Full Name (Last, First, Middle Initial) A. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 0.00 Transaction ID : PAYINTB709
City Santa Barbara	State CA	
Zip Code 93108	Purpose of Disbursement	Category/ Type
Candidate Name Justin Fared		
Office Sought: <input checked="" 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: CA	District: 24	

Full Name (Last, First, Middle Initial) B. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 0.00 Transaction ID : PAYINTB705
City Santa Barbara	State CA	
Zip Code 93108	Purpose of Disbursement	Category/ Type
Candidate Name Justin Fared		
Office Sought: <input checked="" 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: CA	District: 24	

Full Name (Last, First, Middle Initial) c. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 0.00 Transaction ID : PAYINTB707
City Santa Barbara	State CA	
Zip Code 93108	Purpose of Disbursement	Category/ Type
Candidate Name Justin Fared		
Office Sought: <input checked="" 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: CA	District: 24	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 30 OF 58	
	<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)
Justin Fared for Congress

Full Name (Last, First, Middle Initial) A. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 0.00 Transaction ID : PAYINTB708
City Santa Barbara	State CA	
Zip Code 93108	Purpose of Disbursement	Category/ Type
Candidate Name Justin Fared		
Office Sought: <input checked="" 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: CA	District: 24	

Full Name (Last, First, Middle Initial) B. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 0.00 Transaction ID : PAYINTB706
City Santa Barbara	State CA	
Zip Code 93108	Purpose of Disbursement	Category/ Type
Candidate Name Justin Fared		
Office Sought: <input checked="" 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: CA	District: 24	

Full Name (Last, First, Middle Initial) c. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 0.00 Transaction ID : PAYINTB710
City Santa Barbara	State CA	
Zip Code 93108	Purpose of Disbursement	Category/ Type
Candidate Name Justin Fared		
Office Sought: <input checked="" 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: CA	District: 24	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	32174.91

**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 31 OF 58	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Justin Fared for Congress

Full Name (Last, First, Middle Initial) A. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 5000.00 Transaction ID : PAYB707
City Santa Barbara State CA Zip Code 93108	Purpose of Disbursement	
Candidate Name Justin Fared		Category/Type
Office Sought: <input checked="" 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: CA District: 24		

Full Name (Last, First, Middle Initial) B. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 20000.00 Transaction ID : PAYB709
City Santa Barbara State CA Zip Code 93108	Purpose of Disbursement	
Candidate Name Justin Fared		Category/Type
Office Sought: <input checked="" 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: CA District: 24		

Full Name (Last, First, Middle Initial) c. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 10305.00 Transaction ID : PAYB708
City Santa Barbara State CA Zip Code 93108	Purpose of Disbursement	
Candidate Name Justin Fared		Category/Type
Office Sought: <input checked="" 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: CA District: 24		

SUBTOTAL of Disbursements This Page (optional).....	35305.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB19A

Transaction ID : PAYB707

candidate forgives loan

Form/Schedule: SB19A

Transaction ID: PAYB709

candidate forgives loan

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

Form/Schedule: SB19A

Transaction ID : PAYB708

candidate forgives loan

Form/Schedule:

Transaction ID:

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 34 OF 58	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Justin Fareed for Congress

Full Name (Last, First, Middle Initial) A. Justin Fareed		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 10000.00 Transaction ID : PAYB710
City Santa Barbara State CA Zip Code 93108	Purpose of Disbursement	
Candidate Name Justin Fareed		Category/Type
Office Sought: <input checked="" 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: CA District: 24		

Full Name (Last, First, Middle Initial) B. Justin Fareed		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 2000.00 Transaction ID : PAYB711
City Santa Barbara State CA Zip Code 93108	Purpose of Disbursement	
Candidate Name Justin Fareed		Category/Type
Office Sought: <input checked="" 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: CA District: 24		

Full Name (Last, First, Middle Initial) C. Justin Fareed		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 50000.00 Transaction ID : PAYB705
City Santa Barbara State CA Zip Code 93108	Purpose of Disbursement	
Candidate Name Justin Fareed		Category/Type
Office Sought: <input checked="" 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: CA District: 24		

SUBTOTAL of Disbursements This Page (optional).....	62000.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+19A-N5HCB

Form/Schedule: SB19A

Transaction ID : PAYB710

candidate forgives loan

Form/Schedule: SB19A

Transaction ID: PAYB711

candidate forgives loan

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

Form/Schedule: SB19A

Transaction ID : PAYB705

candidate forgives loan

Form/Schedule:

Transaction ID:

**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 37 OF 58	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Justin Fared for Congress

Full Name (Last, First, Middle Initial) A. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 49162.83 Transaction ID : PAYB712
City Santa Barbara	State CA	
Zip Code 93108	Purpose of Disbursement	Category/ Type
Candidate Name Justin Fared	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 24	

Full Name (Last, First, Middle Initial) B. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 50000.00 Transaction ID : PAYB706
City Santa Barbara	State CA	
Zip Code 93108	Purpose of Disbursement	Category/ Type
Candidate Name Justin Fared	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 24	

Full Name (Last, First, Middle Initial) c. Justin Fared		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 801 Buena Vista Ave		Amount of Each Disbursement this Period 837.17 Transaction ID : PAYB692
City Santa Barbara	State CA	
Zip Code 93108	Purpose of Disbursement	Category/ Type
Candidate Name Justin Fared	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 24	

SUBTOTAL of Disbursements This Page (optional).....	100000.00
TOTAL This Period (last page this line number only).....	197305.00

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

Form/Schedule: SB19A

Transaction ID : PAYB712

candidate forgives loan

Form/Schedule: SB19A

Transaction ID: PAYB706

candidate forgives loan

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)

Transaction ID : PAYC25

Justin Fareed for Congress

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

Justin Fareed

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
801 Buena Vista Ave

City State ZIP Code
Santa Barbara CA 93108

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
50000.00 50000.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 04 / Y 2013 M M / D D / Y . None 0.00 % (apr) 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)..... ▶ 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.

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

Form/Schedule: SC/10

Transaction ID : PAYC25

personal funds

Form/Schedule:

Transaction ID:

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)

Transaction ID : PAYC533

Justin Fareed for Congress

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

Justin Fareed

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
801 Buena Vista Ave

City State ZIP Code
Santa Barbara CA 93108

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10305.00 10305.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 06 / Y 2014 M M / D D / Y . None 0.00 % (apr) 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)..... ▶ 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.

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

Form/Schedule: SC/10

Transaction ID : PAYC533

personal funds

Form/Schedule:

Transaction ID:

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)

Transaction ID : PAYC289

Justin Fareed for Congress

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

Justin Fareed

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
801 Buena Vista Ave

City State ZIP Code
Santa Barbara CA 93108

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
50000.00 50000.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) 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)..... ▶ 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.

: 97 `A-G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : PAYC289

personal funds

Form/Schedule:

Transaction ID:

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)

Transaction ID : PAYC461

Justin Fareed for Congress

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

Justin Fareed

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
801 Buena Vista Ave

City State ZIP Code
Santa Barbara CA 93108

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
50000.00 50000.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 14 / Y 2014 M M / D D / Y . None 0.00 % (apr) 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)..... ▶ 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.

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

Form/Schedule: SC/10

Transaction ID : PAYC461

personal funds

Form/Schedule:

Transaction ID:

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)

Transaction ID : PAYC522

Justin Fareed for Congress

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

Justin Fareed

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
801 Buena Vista Ave

City State ZIP Code
Santa Barbara CA 93108

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 5000.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 21 / Y 2014 M M / D D / Y . None 0.00 % (apr) 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)..... ▶ 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.

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

Form/Schedule: SC/10

Transaction ID : PAYC522

personal funds

Form/Schedule:

Transaction ID:

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)

Transaction ID : PAYC600

Justin Fareed for Congress

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

Justin Fareed

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
801 Buena Vista Ave

City State ZIP Code
Santa Barbara CA 93108

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
20000.00 20000.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 22 / Y 2014 M M / D D / Y . None 0.00 % (apr) 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)..... ▶ 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.

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

Form/Schedule: SC/10

Transaction ID : PAYC600

personal funds

Form/Schedule:

Transaction ID:

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)

Transaction ID : PAYC666

Justin Fareed for Congress

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

Justin Fareed

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
801 Buena Vista Ave

City State ZIP Code
Santa Barbara CA 93108

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10000.00 10000.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 09 / Y 2014 M M / D D / Y . None 0.00 % (apr) 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)..... ▶ 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.

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

Form/Schedule: SC/10

Transaction ID : PAYC666

personal funds

Form/Schedule:

Transaction ID:

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)

Transaction ID : PAYC673

Justin Fareed for Congress

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

Justin Fareed

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
801 Buena Vista Ave

City State ZIP Code
Santa Barbara CA 93108

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
2000.00 2000.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
07 / 31 / 2014 M M / D D / Y Y Y Y . None 0.00 % (apr) 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)..... 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.

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

Form/Schedule: SC/10

Transaction ID : PAYC673

personal funds

Form/Schedule:

Transaction ID:

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

NAME OF COMMITTEE (In Full)
Justin Fareed for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Linda C. Taylor Fareed	Nature of Debt (Purpose): reimburse for office/administrative expenses
Mailing Address P.O. Box 50509	
City State Zip Code Santa Barbara CA 93150	

Outstanding Balance Beginning This Period 2045.59	Transaction ID : PAYD668	
Amount Incurred This Period -2045.59	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Harris Media, LLC	Nature of Debt (Purpose): media consulting
Mailing Address 611 S. Congress Avenue, Ste. 400	
City State Zip Code Austin TX 78704	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : PAYD648	
Amount Incurred This Period 0.00	Payment This Period 1500.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Harris Media, LLC	Nature of Debt (Purpose): advertising: facebook/google/nationbuilder fee
Mailing Address 611 S. Congress Avenue, Ste. 400	
City State Zip Code Austin TX 78704	

Outstanding Balance Beginning This Period 7029.82	Transaction ID : PAYD649	
Amount Incurred This Period 0.00	Payment This Period 7029.82	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	0.00
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

NAME OF COMMITTEE (In Full)
Justin Fared for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Love's Towing	Nature of Debt (Purpose): Santa Maria Elks parade
Mailing Address 211 E. Haley Street	
City State Zip Code Santa Barbara CA 93101	

Outstanding Balance Beginning This Period 500.00	Transaction ID : PAYD654	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mercury	Nature of Debt (Purpose): media consulting
Mailing Address 250 Greenwich Street, 36th Floor	
City State Zip Code New York NY 10007	

Outstanding Balance Beginning This Period 5000.00	Transaction ID : PAYD537	
Amount Incurred This Period 0.00	Payment This Period 5000.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mercury	Nature of Debt (Purpose): reimburse travel expenses
Mailing Address 250 Greenwich Street, 36th Floor	
City State Zip Code New York NY 10007	

Outstanding Balance Beginning This Period 1660.92	Transaction ID : PAYD538	
Amount Incurred This Period 0.00	Payment This Period 1660.92	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	0.00
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

NAME OF COMMITTEE (In Full)
Justin Fareed for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mercury	Nature of Debt (Purpose): media consulting
Mailing Address 250 Greenwich Street, 36th Floor	
City State Zip Code New York NY 10007	

Outstanding Balance Beginning This Period 5000.00	Transaction ID : PAYD657	
Amount Incurred This Period 0.00	Payment This Period 5000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mercury	Nature of Debt (Purpose): reimburse travel exp
Mailing Address 250 Greenwich Street, 36th Floor	
City State Zip Code New York NY 10007	

Outstanding Balance Beginning This Period 148.05	Transaction ID : PAYD658	
Amount Incurred This Period 0.00	Payment This Period 148.05	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mercury	Nature of Debt (Purpose): media consulting
Mailing Address 250 Greenwich Street, 36th Floor	
City State Zip Code New York NY 10007	

Outstanding Balance Beginning This Period 5000.00	Transaction ID : PAYD659	
Amount Incurred This Period -3808.97	Payment This Period 1191.03	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	0.00
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

NAME OF COMMITTEE (In Full)
Justin Fareed for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mercury		Nature of Debt (Purpose): reimburse travel exp
Mailing Address 250 Greenwich Street, 36th Floor		
City State	Zip Code	
New York	NY 10007	

Outstanding Balance Beginning This Period		Transaction ID : PAYD660	
1247.93			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
-1247.93	0.00	0.00	

B. 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	

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)	0.00
2) TOTALS This Period (last page this line number only)	0.00
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) ▶	