

# 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

KLAUDER4CONGRESS

ADDRESS (number and street)

811 Parkview Pl. W.

Check if different than previously reported. (ACC)

Fernandina Beach

FL

32034

2. FEC IDENTIFICATION NUMBER ▼

C C00502484

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

FL

04

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

through

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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 James Klauder

Signature of Treasurer James Klauder

[Electronically Filed]

Date

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

Write or Type Committee Name  
**KLAUDER4CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	6705.00	38284.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6705.00	38284.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	47016.14	90098.44
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	47016.14	90098.44
8. Cash on Hand at Close of Reporting Period (from Line 27).....	-29850.25	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	18714.19	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

KLAUDER4CONGRESS

Report Covering the Period: From: 10 / 18 / 2012 To: 11 / 26 / 2012

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 06 / 2012 (date of general election)	COLUMN C Total for 11 / 07 / 2012 (date after general election)  through 11 / 26 / 2012 (last day of reporting period)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
6450.00	36011.00	0.00
(ii) Unitemized		
255.00	2255.00	0.00
(iii) Total of contributions from individuals		
6705.00	38266.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
0.00	0.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 25

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	18.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
6705.00	38284.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
6470.03	18714.19	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
6470.03	18714.19	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
13175.03	56998.19	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 25

Write or Type Committee Name

KLAUDER4CONGRESS

Report Covering the Period: From:  /  /  To:  /  /

**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
47016.14	90098.44	0.00
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 25

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

**21. OTHER DISBURSEMENTS**

0.00	0.00	0.00
------	------	------

**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

47016.14	90098.44	0.00
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

6705.00	38284.00	0.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

47016.14	90098.44	0.00
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3990.86
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	13175.03
25. SUBTOTAL (add Line 23 and Line 24).....	17165.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	47016.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	-29850.25

**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 25
	<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)  
**KLAUDER4CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jack Anderson**

Mailing Address 600 Ocean Road

City State Zip Code  
Vero Beach FL 32963

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

Name of Employer Occupation  
NA retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 04 / 2012**

**Transaction ID : SA11AI.4505**

Amount of Each Receipt this Period  
 contribution **1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Pam Jackson**

Mailing Address 384 Tidewater Circle, N.

City State Zip Code  
Jacksonville FL 32211

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

Name of Employer Occupation  
NA NA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11AI.4491**

Amount of Each Receipt this Period  
 contribution **250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Richard Lunquist**

Mailing Address 1596 Bel Air Ave

City State Zip Code  
Pompano Beach FL 33062

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

Name of Employer Occupation  
self retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 27 / 2012**

**Transaction ID : SA11AI.4490**

Amount of Each Receipt this Period  
 contribution **250.00**

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

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

**1500.00**

**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 8 OF 25
	<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)  
**KLAUDER4CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David McGraw**

Mailing Address 1723 Penman Road

City Jacksonville State FL Zip Code 32250

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

Name of Employer Oyova Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11AI.4467**

Amount of Each Receipt this Period  
 contribution 500.00

**B.** Full Name (Last, First, Middle Initial)  
**David M. Underwood**

Mailing Address 909 Fannin Suite 1640

City Houston State TX Zip Code 77010

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

Name of Employer self Occupation investments

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11AI.4489**

Amount of Each Receipt this Period  
 contribution 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Karla Wheeler**

Mailing Address 65 W. 13th Street 5F

City New York State NY Zip Code 10011

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

Name of Employer NA Occupation homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : SA11AI.4504**

Amount of Each Receipt this Period  
 contribution 2500.00

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

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

4500.00



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 25  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**KLAUDER4CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Kurt Wullenweber**

Mailing Address 97049 Pirates Point Rd.

City State Zip Code  
Yulee FL 32097

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

Name of Employer Occupation  
NA NA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

**Transaction ID : SA11Al.4468**

Amount of Each Receipt this Period  
450.00  
contribution

**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).....

450.00

6450.00

**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 25
	<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)  
**KLAUDER4CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**James Klauder**

Mailing Address 811 Parkview Pl. W.

City Fernandina Beach	State FL	Zip Code 32034
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FEC ID number of contributing federal political committee. **C H2FL04112**

Name of Employer Foundation for Teaching Econom	Occupation Vice President
--	------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**11015.71**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

**Transaction ID : SA13A.4476**

Amount of Each Receipt this Period  

1500.00
---------

 loan by candidate

**B.** Full Name (Last, First, Middle Initial)  
**James Klauder**

Mailing Address 811 Parkview Pl. W.

City Fernandina Beach	State FL	Zip Code 32034
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL04112**

Name of Employer Foundation for Teaching Econom	Occupation Vice President
--	------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**15520.71**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2012

**Transaction ID : SA13A.4484**

Amount of Each Receipt this Period  

4505.00
---------

 loan by candidate

**C.** Full Name (Last, First, Middle Initial)  
**James Klauder**

Mailing Address 811 Parkview Pl. W.

City Fernandina Beach	State FL	Zip Code 32034
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL04112**

Name of Employer Foundation for Teaching Econom	Occupation Vice President
--	------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**15985.74**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

**Transaction ID : SA13A.4523**

Amount of Each Receipt this Period  

465.03
--------

 JK loan

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

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

6470.03
6470.03

**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 11 OF 25			
	<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)  
**KLAUDER4CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Flash Foods</b>		M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		26.65
Purpose of Disbursement gas to political event		<b>Transaction ID : SB17.4458</b>
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/ Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 04		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Flash Foods</b>		M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		35.32
Purpose of Disbursement gas to political event		<b>Transaction ID : SB17.4459</b>
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/ Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 04		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>c. Flash Foods</b>		M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		39.57
Purpose of Disbursement gas to political event		<b>Transaction ID : SB17.4473</b>
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/ Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	101.54
<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 12 OF 25			
	<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)  
**KLAUDER4CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. Flash Foods</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>28</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		28		2012
M M	/	D D	/	Y Y Y Y								
10		28		2012								
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Fernandina Beach</td> <td>FL</td> <td>32034</td> </tr> </table>		City	State	Zip Code	Fernandina Beach	FL	32034	<table border="1"> <tr> <td>16.82</td> </tr> </table>	16.82			
City	State	Zip Code										
Fernandina Beach	FL	32034										
16.82												
Purpose of Disbursement gas to political event		Transaction ID : SB17.4487										
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/Type 002										
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: FL District: 04												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. Flash Foods</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>28</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		28		2012
M M	/	D D	/	Y Y Y Y								
10		28		2012								
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Fernandina Beach</td> <td>FL</td> <td>32034</td> </tr> </table>		City	State	Zip Code	Fernandina Beach	FL	32034	<table border="1"> <tr> <td>31.48</td> </tr> </table>	31.48			
City	State	Zip Code										
Fernandina Beach	FL	32034										
31.48												
Purpose of Disbursement gas to political event		Transaction ID : SB17.4488										
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/Type 002										
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: FL District: 04												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>c. Flash Foods</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>01</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		01		2012
M M	/	D D	/	Y Y Y Y								
11		01		2012								
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Fernandina Beach</td> <td>FL</td> <td>32034</td> </tr> </table>		City	State	Zip Code	Fernandina Beach	FL	32034	<table border="1"> <tr> <td>21.23</td> </tr> </table>	21.23			
City	State	Zip Code										
Fernandina Beach	FL	32034										
21.23												
Purpose of Disbursement gas to political event		Transaction ID : SB17.4503										
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/Type 002										
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: FL District: 04												

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	69.53
<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 13 OF 25			
	<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)  
**KLAUDER4CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. Flash Foods</b>		M M / D D / Y Y Y Y 11 / 02 / 2012	
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period	
City: Fernandina Beach State: FL Zip Code: 32034		10.00	
Purpose of Disbursement: gas to political event		Transaction ID : SB17.4509	
Candidate Name: KLAUDER4CONGRESS		Category/Type: 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012	
State: FL District: 04		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. Flash Foods</b>		M M / D D / Y Y Y Y 11 / 04 / 2012	
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period	
City: Fernandina Beach State: FL Zip Code: 32034		36.64	
Purpose of Disbursement: gas to political event		Transaction ID : SB17.4510	
Candidate Name: KLAUDER4CONGRESS		Category/Type: 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012	
State: FL District: 04		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. Flash Foods</b>		M M / D D / Y Y Y Y 11 / 04 / 2012	
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period	
City: Fernandina Beach State: FL Zip Code: 32034		21.10	
Purpose of Disbursement: gas to political event		Transaction ID : SB17.4511	
Candidate Name: KLAUDER4CONGRESS		Category/Type: 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012	
State: FL District: 04		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	67.74
<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 25	
	<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)  
**KLAUDER4CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Flash Foods</b>		M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City Fernandina Beach	State FL	Zip Code 32034
Purpose of Disbursement gas to political event	Category/ Type 002	Transaction ID : SB17.4512
Candidate Name <b>KLAUDER4CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL District: 04		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Flash Foods</b>		M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City Fernandina Beach	State FL	Zip Code 32034
Purpose of Disbursement gas to political event	Category/ Type 002	Transaction ID : SB17.4522
Candidate Name <b>KLAUDER4CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL District: 04		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. WBOB</b>		M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 4190 Belfort Rd. Ste. 450		Amount of Each Disbursement this Period
City Jacksonville	State FL	Zip Code 32216
Purpose of Disbursement radio ads	Category/ Type 004	Transaction ID : SB17.4474
Candidate Name <b>KLAUDER4CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1531.28
<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 25	
	<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)  
**KLAUDER4CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WOKV</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 8000 Belfort Parkway Suite 100		Amount of Each Disbursement this Period 45005.00 <b>Transaction ID : SB17.4485</b>
City Jacksonville State FL Zip Code 32256	Purpose of Disbursement radio ads 004 Category/Type	
Candidate Name <b>KLAUDER4CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 04		

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

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).....	45005.00
<b>TOTAL</b> This Period (last page this line number only).....	46775.09

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

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4218**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>James Klauer</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 811 Parkview Pl. W.	

City	State	ZIP Code
Fernandina Beach	FL	32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1174.78	0.00	1174.78

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
03 / 31 / 2012	08/2012	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).....	▶	1174.78
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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



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

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4339**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012  
**James Klauer**  Primary  
 Mailing Address 811 Parkview Pl. W.  General  
 Other (specify) ▼

City State ZIP Code  
 Fernandina Beach FL 32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2952.53	0.00	2952.53

**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)..... ▶ 2952.53  
**TOTALS** This Period (last page in this line only)..... ▶ [ ]  
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4403**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>James Klauer</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 811 Parkview Pl. W.	

City	State	ZIP Code
Fernandina Beach	FL	32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2900.00	0.00	2900.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
09 / 18 / 2012	11/6/2012	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).....	▶	2900.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

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

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4412**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012  
**James Klauer**  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
811 Parkview Pl. W.  
 City State ZIP Code  
 Fernandina Beach FL 32034

Original Amount of Loan 2251.06	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2251.06
------------------------------------	------------------------------------	--

**TERMS**  
 Date Incurred: M 09 / D 28 / Y 2012  
 Date Due: M / D / Y 11/06/2012  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	[ ] 2251.06
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

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

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4452**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>James Klauer</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 811 Parkview Pl. W.	

City	State	ZIP Code
Fernandina Beach	FL	32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
208.34	0.00	208.34

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
10 / 17 / 2012	11.07.2012	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).....	▶	208.34
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4476**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>James Klauer</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 811 Parkview Pl. W.	

City	State	ZIP Code
Fernandina Beach	FL	32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500.00	0.00	1500.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
10 / 25 / 2012	11.07.2012	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).....	▶	1500.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

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

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4484**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>James Klauer</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 811 Parkview Pl. W.	

City	State	ZIP Code
Fernandina Beach	FL	32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4505.00	0.00	4505.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
10 / 29 / 2012	11.07.2012	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).....	▶	4505.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

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

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4523**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>James Klauer</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 811 Parkview Pl. W.	

City	State	ZIP Code
Fernandina Beach	FL	32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
465.03	0.00	465.03

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
11 / 06 / 2012	11/07/2012	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).....	▶	465.03
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**KLAUDER4CONGRESS**

Transaction ID : **SC/10.4136**

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

**[PERSONAL FUNDS]**

Election: 2012

**Klauder R. Klauder**

Primary  
 General  
 Other (specify) ▼

Mailing Address  
811 Parkview Pl. W.

City State ZIP Code  
Fernandina Beach FL 32034

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
2089.19 0.00 2089.19

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 12 / D 31 / Y 2011 M M / D D / Y 11/10/2012 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)..... ▶ 2089.19

**TOTALS** This Period (last page in this line only)..... ▶

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



# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**KLAUDER4CONGRESS**

Transaction ID : **SC/10.4226**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Klauder R. Klauder**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
811 Parkview Pl. W.

City State ZIP Code  
Fernandina Beach FL 32034

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
668.26 0.00 668.26

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 03 / D 30 / Y 2012 M M / D D / Y 08/07/2012 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional).....   
**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.