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Image# 201510159003088234

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3)ISBUR In Authorized					Office Use Only
NAME OF COMMITTEE (in fu	TYPE OR P	RINT ▼		mple: If typing	g, type	12FE4M5	Office data only
Francisco For C	ongress						1
ADDRESS (number and :		capa Street					
Check if differ							
than previousl reported. (ACC		bara 				CA S	93105
2. FEC IDENTIFICA	TION NUMBER ▼	CI	TY A			STATE A	ZIP CODE
C C00551721		3. IS T REP		× NEW (N)	OR	AMEND (A)	STATE ▼ DISTRICT ED CA 24 L L L L L L L L L L L L L
	,	(b) 12-Da		Election Repo Primary (12P) Convention (*		General (1	
	5 Quarterly Report (Q	3) Elec	tion on	M M /	D D /	Y " Y " Y " Y	in the State of
January 3	1 Year-End Report (YE	(c) 30-Da	ay POST	-Election Rep	ort for the	:	
				General (30G)	Runoff (30	R) Special (30S)
Terminatio	n Report (TER)	Elec	tion on	M M /	D D /	Y	in the State of
5. Covering Period	M M M / D M 1	2015	" У	through	M N	30	2015
I certify that I have exa	mined this Report ar	d to the best o	f my kno	wledge and b	pelief it is t	rue, correct and	complete.
Type or Print Name of	Treasurer Dale Fra	ncisco					
Signature of Treasurer	Dale Francisco		[.	Electronically I	iled]	Date 10	/ DDD / Y Y Y Y Y Y 15 15 2015
NOTE: Submission of fal	se, erroneous, or inco	mplete information	on may su	ubject the pers	son signing	this Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only							FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

PAGE 2 / 18

Write	or	Туре	Committee	Name
Fra	nc	isco	For Con	aress

09 30 2015 01 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 6509.06 6509.06 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 6509.06 6509.06 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 545.45 2520.97 (from Line 17) (b) Total Offsets to Operating 0.00 285.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 545.45 2235.97 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of -18.11 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 66784.60 Schedule C and/or Schedule D).....

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)

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Write or Type Committee Name

Francisco For Congress

Report Covering the Period: From: 07 01 2015 To: 09 30 2015

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. (CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	6400.00	6400.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	6400.00	6400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
	d) The Candidate	109.06	109.06
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	6509.06	6509.06
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3 I		7	, , , , , , , , , , , , , , , , , , , ,
	a) Made or Guaranteed by the Candidate	0.00	1750.00
,		0.00	0.00
	b) All Other Loans	0.00	1750.00
4. (DFFSETS TO OPERATING		
	EXPENDITURES Refunds, Rebates, etc.)	0.00	285.00
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00
-	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	6509.06	8544.06

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 18

		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPI	ERATING EXPENDITURES	545.45	2520.97
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LO	AN REPAYMENTS:		
	(a)	Of Loans Made or Guaranteed by the Candidate	6000.00	6000.00
	(b)	Of All Other Loans	0.00	0.00
	(c)	TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	6000.00	6000.00
20.	REF	FUNDS OF CONTRIBUTIONS TO:		
	(a)	Individuals/Persons Other Than Political Committees	0.00	0.00
			200	0.00
	(b)	Political Party Committees Other Political Committees	0.00	0.00
	(0)	(such as PACs)	0.00	0.00
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTI	HER DISBURSEMENTS	0.00	0.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	6545.45	8520.97
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	18.28
24	то	TAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	6509.06
25.	SUI	BTOTAL (add Line 23 and Line 24)		6527.34
26.	TO	TAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	6545.45
27.		SH ON HAND AT CLOSE OF REPORTING	G PERIOD	-18.11

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

	FOR LINE NUMBER:	PAGE	5 OF	18
Use separate schedule(s)	(check only one)			
for each category of the	X 11a 11b	11c	11d	
Detailed Summary Page	12 13a	13b	14	15

	and Statements may not be sold or used by any part to the name and address of any political committee				
NAME OF COMMITTEE (In Full) Francisco For Congress	- · ·				
A. Full Name (Last, First, Middle Initial) James Westby Mailing Address 822 Jimeno Road	James Westby				
		07 07 2015			
City Santa Barbara	State Zip Code CA 93103	Transaction ID : 51014.C822			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period			
Name of Employer Retired	Occupation Retired	Receipt 600.00			
Receipt For: 2014 Primary General Other (specify) Primary2014 Deb	t Election Cycle-to-Date 600.00				
Full Name (Last, First, Middle Initial) Sharon Westby		Date of Receipt			
Mailing Address 822 Jimeno Road		07 07 2015			
City Santa Barbara	State Zip Code CA 93103	Transaction ID : 51014.C823			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period			
Name of Employer	Occupation	600.00			
Retired Receipt For: 2014	Retired Election Cycle-to-Date	Receipt			
Primary General Other (specify) Primary2014 Debi	200 00				
Full Name (Last, First, Middle Initial) John Price					
Mailing Address 1550 La Vista Road					
City Santa Barbara	State Zip Code CA 93110	Transaction ID : 51013.C819			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period			
Name of Employer	Occupation	2100.00			
Self Employed Receipt For: 2014	Service Station Owner Election Cycle-to-Date	Receipt			
Primary General Other (specify) Primary2014 Deb	,				
	nber only)	3300.00			

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 6 OF 18 (check only one) 11a 11b 11c 11d 12 13a 13b

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Francisco For Congress Full Name (Last, First, Middle Initial) Janna Price Date of Receipt Mailing Address 1550 La Vista Rd 2015 07 City State Zip Code Transaction ID: 51014.C821 CA 93110 Santa Barbara FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Receipt Self Employed Service Station Owner Receipt For: 2014 Election Cycle-to-Date Primary General 500.00 Other (specify) Primary2014 Debt Full Name (Last, First, Middle Initial) Ruth Reingold Date of Receipt Mailing Address 1482 E Valley Rd 22 2015 City State Zip Code Transaction ID: 51014.C824 Santa Barbara CA 93108 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2600.00 Name of Employer Occupation Retired Receipt Retired Receipt For: 2014 Election Cycle-to-Date Primary General 2600.00 Other (specify) Primary2014 Debt Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify)

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

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

3100.00

6400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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

B.

lm	age# 201510159003088240			
	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 18 (check only one) 11a 11b 11c X 11d 12 13a 13b 14 15
	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Francisco For Congress			
۹.	Full Name (Last, First, Middle Initial) Dale Francisco Mailing Address PO Box 22007			Date of Receipt
	City Santa Barbara	State CA	Zip Code 93121	07 03 2015 Transaction ID : 51014.C820
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Candidate	Occupation Candidate	ı	109.06 Receipt
	Receipt For: 2014 Primary General Other (specify)	Election Cy	/cle-to-Date 1859.06	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
Э.	Mailing Address			M M / D D / Y Y Y Y
	City	State	Zip Code	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	r	
	Receipt For: Primary General Other (specify)	Election Cy	/cle-to-Date	
С .	Full Name (Last, First, Middle Initial)			Date of Receipt
	Nacional Address			The state of the s

	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
C.	Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer	Occupation	Amount of Each Receipt this Period
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
\[\frac{1}{2}\]	SUBTOTAL of Receipts This Page (optional)		109.06

109.06

S

""	nage# 20131013900	3000241				
		(FEC Form BURSEMENT	•	Use separate sol for each categor Detailed Summa	nedule(s) (y of the	FOR LINE NUMBER: PAGE 8 OF 18 (check only one) X 17
						erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMI	•	sing the name and a	address of any por	tical committee	to solicit contributions from such committee.
	Francisco Fo	or Congress				
A.	Full Name (Last, F Mail Chimp	irst, Middle Initial)				Date of Disbursement
	Mailing Address 675 Ponce De Leon Avenue NE #5000					07 06 2015
	City Atlanta		State GA	Zip Code 30308-		Amount of Each Disbursement this Period
	Purpose of Disburs Email Services	sement				20.00 Transaction ID : 51014.E1110
	Candidate Name				Category/ Type	Transaction ib . 31014.E1110
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		EMAIL SERVICES
		District:				
В.	Full Name (Last, First, Middle Initial) Mail Chimp Mailing Address 675 Ponce De Leon Avenue NE #50		venue NE #5000			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Atlanta		State GA	Zip Code 30308-		Amount of Each Disbursement this Period
	Purpose of Disburs Email Services	sement			· · · ·	20.00
	Candidate Name				Category/ Type	Transaction ID: 51013.E1097
	Office Sought:	House Senate President District:	Disbursement For Primary Other (s	General		EMAIL SERVICES
_	Full Name (Last, F	irst, Middle Initial)				
C.	California Re	epublican Part	у			Date of Disbursement
Mailing Address 1903 West Magnolia Boulevard			Boulevard			08 25 2015
	City Burbank			p Code 91506-		Amount of Each Disbursement this Period
	Purpose of Disburs Mtg Registration F	sement Tees		71000		195.00
	Candidate Name				Category/ Type	Transaction ID: 51013.E1098
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		MTG REGISTRATION FEES

State:

District:

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

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

235.00

235.00

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 18 (check only one) 17 18 X 19a 19b				
	ny information copied from such Reports and Statements m						
\rightarrow or	for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Francisco For Congress	address of any political comm	intee to solicit contributions from such committee.				
۸.	Full Name (Last, First, Middle Initial) Dale Francisco		Date of Disbursement				
	Mailing Address PO Box 22007		07 14 2015				
	City State Santa Barbara CA	Zip Code 93121-	Amount of Each Disbursement this Period				
	Purpose of Disbursement Repay Loan Made/Guar. by Cand Candidate Name	Catego					
	Office Sought: House Senate President State: Disbursement For Primary Other (s	General					
3.	Full Name (Last, First, Middle Initial) Dale Francisco	Il Name (Last, First, Middle Initial) Oale Francisco					
	Mailing Address PO Box 22007 City State	Zip Code	09 14 2015				
	Santa Barbara CA Purpose of Disbursement Repay Loan Made/Guar. by Cand	93121-	Amount of Each Disbursement this Period 250.00				
	Candidate Name	Catego Type					
	Office Sought: House Senate President Disbursement For Primary Other (s	General					
Э.	Full Name (Last, First, Middle Initial) Dale Francisco		Date of Disbursement				
	Mailing Address PO Box 22007		07 24 2015				
	•	p Code 3121-	Amount of Each Disbursement this Period 2000.00				
	Repay Loan Made/Guar. by Cand Candidate Name	Catego Type	Transaction ID : 51014.E1114				
	Office Sought: House Senate President State: Disbursement For Primary Other (s	General					
s	UBTOTAL of Disbursements This Page (optional)		2450.00				
	TOTAL This Period (last page this line number only)						

T	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	of the Page	FOR LINE NUMBER: PAGE 10 OF 18 (check only one) 17
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a			
\rangle	NAME OF COMMITTEE (In Full) Francisco For Congress			
٩.	Full Name (Last, First, Middle Initial) Dale Francisco Mailing Address RO Rev 2007			Date of Disbursement 07 13 2015
	Mailing Address PO Box 22007			07 13 2013
	City State Santa Barbara CA	Zip Code 93121-		Amount of Each Disbursement this Period
	Purpose of Disbursement Repay Loan Made/Guar. by Cand	00121		1000.00
	Candidate Name		Category/ Type	Transaction ID : 51014.E1112
	Office Sought: House Senate President Disbursement For Primary Other (s	General		
3.	Full Name (Last, First, Middle Initial) Dale Francisco			Date of Disbursement
	Mailing Address PO Box 22007			07 09 2015
	City State Santa Barbara CA	Zip Code 93121-		Amount of Each Disbursement this Period
	Purpose of Disbursement Repay Loan Made/Guar. by Cand	00121		500.00
	Candidate Name		Category/ Type	Transaction ID : 51014.E1111
	Office Sought: House Senate President State: Disbursement For Primary Other (s	General		
	Full Name (Last, First, Middle Initial)			5
Э.	Dale Francisco			Date of Disbursement
Mailing Address PO Box 22007				08 / D D / Y Y Y Y Y 2015
		p Code 3121-		Amount of Each Disbursement this Period
Purpose of Disbursement Repay Loan Made/Guar. by Cand			750.00	
	Candidate Name		Category/ Type	Transaction ID : 51013.E1106
	Office Sought: House Senate Primary President Disbursement For Primary Other (s	: 2014 General specify) Primary 2016	5	
	State: District:			
S	UBTOTAL of Disbursements This Page (optional)			2250.00

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

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 18 (check only one) 17
Any information copied from such Reports and State or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) Francisco For Congress		
Senate President State: District:	State Zip Code CA 93121- Category Type ment For: 2014 Primary General Other (specify) Primary 2016	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Santa Barbara Purpose of Disbursement Repay Loan Made/Guar. by Cand Candidate Name Office Sought: House Disburse Senate	State Zip Code CA 93121- Category Type ment For: 2014 Primary General Other (specify) Primary 2016	Date of Disbursement M M M / D D / Y Y Y Y Y O9 30 2015 Amount of Each Disbursement this Period 200.00 Transaction ID: 51013.E1107
Full Name (Last, First, Middle Initial) Dale Francisco Mailing Address PO Box 22007 City State Santa Barbara CA Purpose of Disbursement Repay Loan Made/Guar. by Cand Candidate Name Office Sought: House Senate President State: District:	e Zip Code 93121- Category Type ment For: 2014 Primary General Other (specify) Primary 2016	Date of Disbursement M M J 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Disbursements This Page (optional).		1300.00

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

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 12

×	13a
	13b

18

List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Occupation Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Mame of Employer Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Mame of Employer Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding: Amount Guaranteed Outstanding:	DANS		Detailed Summary Pag	
Loan Source For Congress Loan Source For Congress Loan Source For Congress Mailing Address Po Box 22007 City State ZIP Code Santa Barbara CA S3121- Conginal Amount of Loan Cumulative Payment To Date Belance Outstanding at Close of This Pe 24800.00 7200.00 TERMS Date Incurred Date Due Interest Rate Secured: Mailing Address Occupation Mailing Address City State ZIP Code City State ZIP Code Cumulative Payment To Date Belance Outstanding at Close of This Pe 24800.00 7200.00 TERMS Date Incurred Date Due Interest Rate Secured: Name of Employer Name of Employer Name of Employer City State ZIP Code Guaranteed Outstanding: Amount Amount City State ZIP Code Guaranteed Outstanding: Amount Amount Amount City State ZIP Code Guaranteed Outstanding: Amount Amount Amount Amount Amount Amount Amount Amount City State ZIP Code Guaranteed Outstanding: Amount	AME OF COMMITTEE (In Full)		Transac	tion ID : LS40521.C724
Dale Francisco Mailing Address PO Box 22007 City State ZIP Code Santa Barbara CA 93121- Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Pe 32000.00 Z4800.00 Z4800.00 T2000.00 TERMS Date Incurred Date Due Interest Rate Secured: 1				
Dale Francisco Mailing Address PO Box 22007 City State ZIP Code Santa Barbara CA 93121- Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Pe 32000.00 Z4800.00 Z4800.00 T2000.00 TERMS Date Incurred Date Due Interest Rate Secured: 1	LOAN SOURCE Full Name (Last, Fir	rst, Middle Initial)	IPERSONAL FUNDSI	Election: 2014
Mailing Address Occupation	,	,	[FERGORAL FORDO]	
PO Box 22007 City State ZIP Code Santa Barbara CA 93121-	Mailing Address			1 -
Santa Barbara CA 93121- Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Pe 24800.00 TERMS Date Incurred Date Due Interest Rate Secured: Onder Secured: Onder Secured: Name of Employer Mailing Address Occupation Mailing Address Occupation Mailing Address Occupation Mailing Address Occupation Amount City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: Amount Outstanding: Occupation				Other (specify)
Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Pe 24800.00 TERMS Date Incurred Date Due Interest Rate Secured: OnDEMAND Occupation Mailing Address Occupation Amount City State ZiP Code Outstanding: Tell Name (Last, First, Middle Initial) Mailing Address Occupation Amount City State ZiP Code Outstanding: Tell Name (Last, First, Middle Initial) Name of Employer Occupation Amount City State ZiP Code Outstanding: Tell Name (Last, First, Middle Initial) Name of Employer Occupation Amount City State ZiP Code Outstanding: Tell Name (Last, First, Middle Initial) Name of Employer Occupation Amount City State ZiP Code Outstanding: Tell Name (Last, First, Middle Initial) Name of Employer Occupation Amount Outstanding: Amount Outstanding: Tell Name (Last, First, Middle Initial) Name of Employer Occupation Amount Outstanding: Amount Outstanding: Tell Name (Last, First, Middle Initial) Name of Employer Occupation Amount Outstanding: Tell Name (Last, First, Middle Initial) Name of Employer Occupation Amount Outstanding: Occupation Amount Outstanding:	City	State ZIP	Code	
TERMS Date Incurred Date Due Interest Rate Secured: Date Due Amount Guaranteed Outstanding: Date Due Interest Rate Secured: Date Due Amount Guaranteed Outstanding: Date Due Interest Rate Secured: Date Due Amount Guaranteed Outstanding: Date Due Interest Rate Secured: Namount Guaranteed Outstanding: Date Due Interest Rate Secured: Namount Guaranteed Outstanding: Date Due Interest Rate Interest Rate Secured: Interest Rate Secured: Interest Rate Interest Rate Secured: Interest Rate Interest Rate Interest Rate Interest Rate Interest R	Santa Barbara	CA 93	121-	
TERMS Date Incurred Date Due Interest Rate Secured: Mo4	Original Amount of Loan	Cumulative Paymen	t To Date Bala	nce Outstanding at Close of This Period
Date Incurred Date Due Interest Rate Secured: Mod	32000.0	0	24800.00	7200.00
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mame of Employer City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Cocupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Cocupation Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: Amount Guaranteed Outstanding:		Date [Due Interest Rate	e Secured:
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Outstanding: City State ZIP Code Guaranteed Outstanding: Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: Amount Guaranteed Outstanding:			V V V V	% (apr)
Mailing Address Occupation Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Occupation Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: Amount Guaranteed Outstanding:	List All Endorsers or Guarantors (if	any) to Loan Source		Yes No
City State ZIP Code Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Outstanding: Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Outstanding: Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: Amount Guaranteed Outstanding:	1. Full Name (Last, First, Middle Init	ial)	Name of Employer	
City State ZIP Code Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Outstanding: Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: City State ZIP Code Guaranteed Outstanding: Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Amount Guaranteed Outstanding: City State ZIP Code Occupation Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: Amount Guaranteed Outstanding:	Mailing Address		Occupation	
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City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code Guaranteed Outstanding: Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: City State ZIP Code Guaranteed Outstanding:	Mailing Address		Occupation	
Outstanding: 3. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Mailing Address Occupation Name of Employer Name of Employer Amount Guaranteed Outstanding: Amount Guaranteed Outstanding:				
Mailing Address City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount City State ZIP Code City Code Outstanding:	City	tate ZIP Code		
Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding: Amount Guaranteed Outstanding:	3. Full Name (Last, First, Middle Initia	al)	Name of Employer	
City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding:	Mailing Address		Occupation	
Outstanding: 4. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed Outstanding:				
Mailing Address Occupation Amount Guaranteed Outstanding:	City	tate ZIP Code		9
City State ZIP Code Amount Guaranteed Outstanding:	4. Full Name (Last, First, Middle Initia	al)	Name of Employer	
City State ZIP Code Guaranteed Outstanding:	Mailing Address		Occupation	
Outstanding:			Amount	
	City	tate ZIP Code		7
SUBTOTALS This Period This Page (optional)	SUBTOTALS This Period This Page (op-	tional)	<u> </u>	7200.00
**TOTALS This Period (last page in this line only)	OTALS This Period (last page in this li	ne only)		, , , , , , , , ,
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summar	Carry outstanding balance only to LINE	3, Schedule D, for this line	e. If no Schedule D, carry forw	vard to appropriate line of Summarv.

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 13

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	13b

OF

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DANS			Detailed Summary Pa		(check only one	e) [-	13a 13b
AME OF COMMITTEE (In Full)			Transa	ction IE	: LS40712.C80	9	
Francisco For Congress							
LOAN SOURCE Full Name (Last,	First, Middle	Initial)	[PERSONAL FUNDS]	Elect	ion: 2014		
Dale Francisco		,	[i ENGONAL i GNDG]	X	Primary		
Mailing Address					General Other (specify) •	•	
PO Box 22007							
City	St	ate ZIP Co	de				
Santa Barbara	(CA 93121-					
Original Amount of Loan	C	Cumulative Payment To	Date Bala	ance O	utstanding at Cl	ose of Th	nis Period
21852	2.48		0.00		,	21852	2.48
TERMS Date Incurred		Date Due	Interest Rat	e		Secured:	
^M 05 ^M / ^D 15 ^D / Y Ž014	Y	M / D D / Y	NĎEMĂNĎ 0.00	-	% (apr)	Yes	X
List All Endorsers or Guarantors	(if any) to L	oan Source				165	No
1. Full Name (Last, First, Middle In	nitial)		Name of Employer				
Mailing Address			Occupation				
			Amount				
City	State	ZIP Code	Guaranteed Outstanding:	7	7		
2. Full Name (Last, First, Middle In	itial)		Name of Employer				
Mailing Address			Occupation				
			Amount	-			_
City	State	ZIP Code	Guaranteed Outstanding:	7	-		_
3. Full Name (Last, First, Middle In	itial)		Name of Employer				
Mailing Address			Occupation				
			Amount	-			_
City	State	ZIP Code	Guaranteed Outstanding:	7			_
4. Full Name (Last, First, Middle In	itial)		Name of Employer				
Mailing Address			Occupation				
			Amount	_			_
City	State	ZIP Code	Guaranteed Outstanding:	7	7	(R)	
SUBTOTALS This Period This Page (d	optional)		<u> </u>		7 7	21852	.48
TOTALS This Period (last page in this	line only)		·····		, ,		
Carry outstanding balance only to LIN	NE 3, Sched	ule D, for this line. If	no Schedule D, carry for	ward to	appropriate li	ne of Su	mmary.

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

14

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X	13a
	13b

18

Detailed Summary Page Transaction ID: LS50409.C817 NAME OF COMMITTEE (In Full) Francisco For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Dale Francisco General Mailing Address Other (specify) \blacktriangledown PO Box 22007 State ZIP Code City CA 93121-Santa Barbara Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 3350.00 0.00 3350.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D11 ž014 0.00 ONDEMAND % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 3350.00 TOTALS This Period (last page in this line only) 32402.48 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 15 OF
FOR LINE NUMBER:
(check only one)

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	X	10

18

NAME OF COMMITTEE (In Full)

Francisco For Congress

Francisco For Congres	SS		
A. Full Name (Last, First, Middle Initial) of Debte Red Rock Strategies	Nature of Debt (Purpose): Consulting Management		
Mailing Address 9500 East Flamingo #203			
City State Las Vegas	Zip Code NV	89147-	
Outstanding Balance Beginning This Period 14500.00			Transaction ID : LS40710.E1045
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debto	r or Croditor	0.00	Noture of Dobt (Durposs):
Red Rock Strategies	r or Greattor		Nature of Debt (Purpose): Media
Mailing Address 9500 East Flamingo #203			
City State Las Vegas	Zip Code NV	89147-	
Outstanding Balance Beginning This Period 6150.00			Transaction ID: LS40522.E985
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
0.00	,	0.00	6150.00
C. Full Name (Last, First, Middle Initial) of Debti	or or Creditor		Nature of Debt (Purpose): Travel
Mailing Address 9500 East Flamingo #203			
City Las Vegas	State NV	Zip Code 89147-	
Outstanding Balance Beginning This Period 234.56			Transaction ID: LS40415.E910
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
0.00	,	0.00	234.56
1) SUBTOTALS This Period This Page (optional)			20884.56
2) TOTALS This Period (last page this line number	r only)		
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page or	ily)	<u> </u>
4) ADD 2) and 3) and carry forward to appropriate	e line of Summa	ry Page (last page only)	·,

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

Excluding Loans

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

PAGE 16 OF FOF (che

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18

NAME OF COMMITTEE (In Full)

F	rancisco	For	Congress
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Francisco For Congres	SS	
A. Full Name (Last, First, Middle Initial) of Deb Red Rock Strategies	otor or Creditor	Nature of Debt (Purpose): Travel
Mailing Address 9500 East Flamingo #203		
City State Las Vegas	Zip Code NV 89147-	
Outstanding Balance Beginning This Period	14V 00147	Transaction ID : LS40710.E1046
3419.54		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00 3419.54
B. Full Name (Last, First, Middle Initial) of Debt Red Rock Strategies Mailing Address 9500 East Flamingo #203	or or Creditor	Nature of Debt (Purpose): Data Lists
City State	Zip Code	
Las Vegas	NV 89147-	
Outstanding Balance Beginning This Period 54.49 Amount Incurred This Period 0.00	Payment This Period	Outstanding Balance at Close of This Period 54.49
C. Full Name (Last, First, Middle Initial) of Deb In Compliance Inc.	otor or Creditor	Nature of Debt (Purpose): Consulting Compliance
Mailing Address PO Box 751271		
City Las Vegas	State Zip Code NV 89136-	
Outstanding Balance Beginning This Period 4950.00		Transaction ID: LS40415.E911
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	7 7	0.00 4950.00
 SUBTOTALS This Period This Page (optional) TOTALS This Period (last page this line numb 		• 8424.03
3) TOTAL OUTSTANDING LOANS from Schedul	e C (last page only)	>
4) ADD 2) and 3) and carry forward to appropria	ate line of Summary Page (last page of	only) ►

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

Excluding Loans

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

PAGE 17 OF FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)

F	rancisco For Congress					
	A. Full Name (Last, First, Middle Initial) of Debtor or	r Credi	tor			Nature of Debt (Purpose):
	In Compliance Inc.					Compliance Consulting
	Mailing Address PO Box 751271					
ı	City State	Zip C	ode			
	Las Vegas	NV		89136-		
	Outstanding Balance Beginning This Period 4000.00 Amount Incurred This Period		Dove	pont This Davied		Transaction ID : LS51015.E1117
	Amount incurred this Period	-	Fayii	nent This Period		Outstanding Balance at Close of This Period
	500.00		7	-	0.00	4500.00
	B. Full Name (Last, First, Middle Initial) of Debtor or In Compliance Inc.	Credito	or			Nature of Debt (Purpose): Office Supplies
ŀ	Mailing Address PO Box 751271					
	City State	Zip C				
	Las Vegas	NV		89136-		
	Outstanding Balance Beginning This Period					Transaction ID : LS40710.E1050
	23.78					
	Amount Incurred This Period		Paym	ent This Period		Outstanding Balance at Close of This Period
	0.00		7	7	0.00	23.78
ĺ	C. Full Name (Last, First, Middle Initial) of Debtor of In Compliance Inc.	r Credi	itor			Nature of Debt (Purpose): Printing
	Mailing Address PO Box 751271					
	City Las Vegas	State NV		Zip Code 89136-		
	Outstanding Balance Beginning This Period 2.00					Transaction ID : LS40415.E912
	Amount Incurred This Period		Paym	ent This Period		Outstanding Balance at Close of This Period
	0.00		7	,	0.00	2.00
1)	SUBTOTALS This Period This Page (optional)				>	4525.78
2)	TOTALS This Period (last page this line number onl	ly)			>	, ,
3)	TOTAL OUTSTANDING LOANS from Schedule C (I	last pag	ge onl	у)	>	
4)	ADD 2) and 3) and carry forward to appropriate line	e of Su	ummar	y Page (last page	only)	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

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

PAGE 18 OF FOR LINE NUM (check only one

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Excluding Loans NAME OF COMMITTEE (In Full)

Francisco For Congress	F	rancisco	For	Congr	ess
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Tarreless Tel Serigise	<u> </u>		
A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of Debt (Purpose):
In Compliance Inc.			Printing
Mailing Address PO Box 751271			
City State	Zip Code		
Las Vegas	NV	89136-	
Outstanding Balance Beginning This Period			Transaction ID : LS40710.E1049
17.00			
7			
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period
0.00		0.00	17.00
	,		
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose): Shipping
In Compliance Inc.			J. I. P. I.
Mailing Address PO Box 751271			
City State	Zip Code		
Las Vegas	NV NV	89136-	
Outstanding Balance Beginning This Period			Transaction ID : LS40415.E913
45.75			
	_		
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period
0.00		0.00	45.75
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of Debt (Purpose):
Prosper Group			Email Svcs
Mailing Address 435 East Main Street #250			
400 East Wall Street #200			
City	State	Zip Code	
Greenwood	IN	46143-	
Outstanding Balance Beginning This Period			Transaction ID : LS40710.E1048
485.00			
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period
0.00		0.00	485.00
9 9	,	9	
			547.75
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page this line number only)		34382.12	
			32402.48
TOTAL OUTSTANDING LOANS from Schedule	U (last page onl	у)	
ADD 2) and 3) and carry forward to appropriate	line of Summar	y Page (last page only)	66784.60