

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

Ostrander For Congress

ADDRESS (number and street)

PO Box 1105

Check if different than previously reported. (ACC)

San Luis Obispo

CA

93406

2. FEC IDENTIFICATION NUMBER ▼

C C00575696

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

06

06

2016

in the State of

CA

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

04

01

2016

through

05

18

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Joni Marie Martinez

Signature of Treasurer Joni Marie Martinez

[Electronically Filed]

Date

05

27

2016

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Ostrander For Congress

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))....	9985.98	42369.44
(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)).....	9985.98	42369.44
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	14897.43	59018.35
(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)).....	14897.43	59018.35
8. Cash on Hand at Close of Reporting Period (from Line 27).....	-198.02	
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).....	16450.00	

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

Ostrander 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).....	8973.98	36111.60
(ii) Unitemized.....	1012.00	5757.84
(iii) TOTAL of contributions from individuals ▶	9985.98	41869.44
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	9985.98	42369.44
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	3600.00	16450.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	3600.00	16450.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.10	0.89
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	13586.08	58820.33

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14897.43	59018.35
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	14897.43	59018.35

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1113.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13586.08
25. SUBTOTAL (add Line 23 and Line 24).....	14699.41
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14897.43
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	-198.02

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

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

FOR LINE NUMBER: PAGE 5 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Christian Achgill

Mailing Address 520 W. 4th St.

City Bloomington State IN Zip Code 47404

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2016

Transaction ID : SA11AI.4691

Amount of Each Receipt this Period
 20.00

Memo Item
 Paid through NationBuilder

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 298.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2016

Transaction ID : SA11AI.4637

Amount of Each Receipt this Period
 204.83

Memo Item
 Total earmarked through conduit; PAC limit not affected

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 346.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2016

Transaction ID : SA11AI.4638

Amount of Each Receipt this Period
 47.38

Memo Item
 Total earmarked through conduit; PAC limit not affected

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

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

252.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 59
	<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)
Ostrander For Congress

Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 01 / 2016
Mailing Address PO Box 382110		Transaction ID : SA11AI.4639
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 94.93
Name of Employer	Occupation	<input type="checkbox"/> Memo Item Total earmarked through conduit; PAC limit not affected
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 441.11	

Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 08 / 2016
Mailing Address PO Box 382110		Transaction ID : SA11AI.4640
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 132.50
Name of Employer	Occupation	<input type="checkbox"/> Memo Item Total earmarked through conduit; PAC limit not affected
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 573.61	

Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2016
Mailing Address PO Box 382110		Transaction ID : SA11AI.4641
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 104.92
Name of Employer	Occupation	<input type="checkbox"/> Memo Item Total earmarked through conduit; PAC limit not affected
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 678.53	

SUBTOTAL of Receipts This Page (optional).....	332.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 59
	<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)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
712.95

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : SA11AI.4642

Amount of Each Receipt this Period
34.42

Memo Item
Total earmarked through conduit; PAC limit not affected

B. Full Name (Last, First, Middle Initial)
Henry Ahlstrom

Mailing Address 669 Camino Contento

City State Zip Code
Arroyo Grande CA 93420

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

Name of Employer Occupation
State of California Psychologist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.4649

Amount of Each Receipt this Period
25.00

Memo Item
Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Lawrence Anderson

Mailing Address 8580 Corriente Rd.

City State Zip Code
Atascadero CA 93422

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 19 / 2016

Transaction ID : SA11AI.4671

Amount of Each Receipt this Period
50.00

Memo Item
Paid through NationBuilder

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

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

34.42

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

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

FOR LINE NUMBER: PAGE 8 OF 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

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

Mailing Address 367 Fresno Ave.

City Morro Bay State CA Zip Code 93442

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2016

Transaction ID : SA11AI.4697

Amount of Each Receipt this Period
 20.00

Memo Item
 Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Vicent Antonio

Mailing Address 2944 Branch Mill Rd

City Arroyo Grande State CA Zip Code 93420

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 13 / 2016

Transaction ID : SA11AI.4667

Amount of Each Receipt this Period
 25.00

Memo Item
 Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Vicent Antonio

Mailing Address 2944 Branch Mill Rd

City Arroyo Grande State CA Zip Code 93420

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : SA11AI.4753

Amount of Each Receipt this Period
 25.00

Memo Item
 Paid through NationBuilder

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

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

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 9 OF 59
	<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)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Sam Appleton

Mailing Address 819 Cambria Way

City Santa Barbara State CA Zip Code 93105

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

Name of Employer n/a Occupation Student

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 26 / 2016

Transaction ID : SA11AI.4689

Amount of Each Receipt this Period
 _____ 25.00

Memo Item
Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Kathleen Aragon

Mailing Address 5786 San Jacinto

City Atascadero State CA Zip Code 93422

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2016

Transaction ID : SA11AI.4675

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Cindy Binkele

Mailing Address 197 Pacific Ave.

City Cayucos State CA Zip Code 93430

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : SA11AI.4754

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
Paid through NationBuilder

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

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

_____ 0.00

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

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

FOR LINE NUMBER: PAGE 10 OF 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Claudine Blackwell

Mailing Address 1020 Penman Springs Rd.

City Paso Robles State CA Zip Code 93446

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

Name of Employer Self-Employed Occupation Winemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2016

Transaction ID : SA11AI.4693

Amount of Each Receipt this Period
 500.00

Memo Item
 Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Barbara Bliss

Mailing Address 1764 Trouville Ave.

City Grover Beach State CA Zip Code 93433

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : SA11AI.4735

Amount of Each Receipt this Period
 25.00

Memo Item
 Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Pedro Cervantes

Mailing Address 5919 El Camino Real

City Atascadero State CA Zip Code 93422

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

Name of Employer Kibo Software Inc. Occupation System Administrator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2016

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period
 20.00

Memo Item
 Paid through NationBuilder

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 11 OF 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

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

Mailing Address 630 Via Vaquero

City Arroyo Grande State CA Zip Code 93420

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

Name of Employer Adamski Moroski Madden Cumberl Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.4684

Amount of Each Receipt this Period
 250.00

Memo Item
 Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Michael Cussen

Mailing Address 411 14th Street

City Paso Robles State CA Zip Code 93446

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

Name of Employer Self-Employed Occupation Concrete Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : SA11AI.4756

Amount of Each Receipt this Period
 100.00

Memo Item
 Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Philip Davis

Mailing Address 772 San Simeon Dr.

City Salinas State CA Zip Code 93901

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

Name of Employer Monterey County Office of Educ Occupation Education

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : SA11AI.4600

Amount of Each Receipt this Period
 32.25

Memo Item
 Earmarked through ActBlue

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 12 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Andrew Davol

Mailing Address 5185 Delzura Ave.

City Atascadero State CA Zip Code 93422

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

Name of Employer Cal Poly Occupation Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2016

Transaction ID : SA11AI.4723

Amount of Each Receipt this Period
 100.00

Memo Item
 Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Terre Dunivant

Mailing Address n/a

City n/a State Zip Code

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 75.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2016

Transaction ID : SA11AI.4657

Amount of Each Receipt this Period
 50.00

Memo Item
 Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Terre Dunivant

Mailing Address n/a

City n/a State Zip Code

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : SA11AI.4759

Amount of Each Receipt this Period
 50.00

Memo Item
 Paid through NationBuilder

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 13 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Calvin Fernandes

Mailing Address 5319 Honda Ave. Apt. A

City Atascadero State CA Zip Code 93422

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

Name of Employer Self-Employed Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.4688

Amount of Each Receipt this Period
 25.00

Memo Item
 Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Scott Fisher

Mailing Address 448 Hansen Hill Rd

City Arroyo Grande State CA Zip Code 93420

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

Name of Employer Mindbody Occupation Accountant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2016

Transaction ID : SA11AI.4713

Amount of Each Receipt this Period
 500.00

Memo Item
 Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Rachael Foe

Mailing Address 310 Morro Ave.

City Pismo Beach State CA Zip Code 93449

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

Name of Employer Lucia Mar USD Occupation Teacher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2016

Transaction ID : SA11AI.4707

Amount of Each Receipt this Period
 25.00

Memo Item
 Paid through NationBuilder

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

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

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 14 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Janet Gibson

Mailing Address 220 Barlow Lane

City Morro Bay State CA Zip Code 93442

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

Name of Employer Self-Employed Occupation Organizing Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.4651

Amount of Each Receipt this Period
 _____ 5.00

Memo Item
Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
David Glass

Mailing Address 3 Washington Sq Apt 3F

City Larchmont State NY Zip Code 10538

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

Name of Employer Self-Employed Occupation Social Worker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2016

Transaction ID : SA11AI.4721

Amount of Each Receipt this Period
 _____ 15.00

Memo Item
Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Haik Hakobian

Mailing Address 310 E. Cota St.

City Santa Barbara State CA Zip Code 93101

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

Name of Employer Haik's German Autohaus Occupation Owner/mechanic

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2016

Transaction ID : SA11AI.4745

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
Paid through NationBuilder

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

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

_____ 0.00

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

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

FOR LINE NUMBER: PAGE 15 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
August Hirschhorn

Mailing Address 6739 El Colegio Rd. #210

City Goleta State CA Zip Code 93117

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2016

Transaction ID : SA11AI.4703

Amount of Each Receipt this Period
 _____ 15.00

Memo Item
Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Scott Holland

Mailing Address 6713 Georgia Avenue

City Bradenton State FL Zip Code 34207

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

Name of Employer Self-Employed Occupation Legal/Business Strategist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : SA11AI.4594

Amount of Each Receipt this Period
 _____ 10.00

Memo Item
Earmarked through ActBlue

C. Full Name (Last, First, Middle Initial)
Barbara Dianne Jackson

Mailing Address 5472 Bolsa Rd.

City Atascadero State CA Zip Code 93422

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 930.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : SA11AI.4758

Amount of Each Receipt this Period
 _____ 725.00

Memo Item
Contribution

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

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

_____ 725.00

**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 16 OF 59
	<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)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
William Jacobs

Mailing Address 1317 N V St.
Spc 142

City Lompoc State CA Zip Code 93436

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

Name of Employer n/a Occupation Disabled

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : SA11AI.4653

Amount of Each Receipt this Period
 _____ 10.00

Memo Item
Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Mudfy Johnson

Mailing Address 805 Ridgeway

City Morro Bay State CA Zip Code 93442

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

Name of Employer Self-Employed Occupation Property Management

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2016

Transaction ID : SA11AI.4699

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Evy Justesen

Mailing Address 2065 McCollum St.

City San Luis Obispo State CA Zip Code 93405

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2016

Transaction ID : SA11AI.4695

Amount of Each Receipt this Period
 _____ 50.00

Memo Item
Paid through NationBuilder

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

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

_____ 0.00

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

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

FOR LINE NUMBER: PAGE 17 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Thomas Keough

Mailing Address **PO Box 3357**

City **San Luis Obispo** State **CA** Zip Code **93403**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 10 / 2016

Transaction ID : SA11AI.4660

Amount of Each Receipt this Period
250.00

Memo Item
 Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Tiffany Kim

Mailing Address **3405 Richland Dr.
Apt. 4**

City **Santa Barbara** State **CA** Zip Code **93105**

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

Name of Employer **CA Dept. of Rehabilitation** Occupation **Rehabilitation Counselor**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2016

Transaction ID : SA11AI.4613

Amount of Each Receipt this Period
25.00

Memo Item
 Earmarked through ActBlue

C. Full Name (Last, First, Middle Initial)
Nancy Kolliner

Mailing Address **1544 Valley View**

City **Los Osos** State **CA** Zip Code **93402**

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

Name of Employer **Self-Employed** Occupation **Owner**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 09 / 2016

Transaction ID : SA11AI.4727

Amount of Each Receipt this Period
250.00

Memo Item
 Paid through NationBuilder

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

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

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 18 OF 59
	<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)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Dan Larkins

Mailing Address 1590 Cunningham Way

City Santa Rosa State CA Zip Code 95403

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

Name of Employer Veteran's Affairs Occupation Social Worker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2016

Transaction ID : SA11AI.4611

Amount of Each Receipt this Period
 25.00

Memo Item
Earmarked through ActBlue

B. Full Name (Last, First, Middle Initial)
Brian Lindberg

Mailing Address PO Box 27

City Creston State CA Zip Code 93432

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.4648

Amount of Each Receipt this Period
 25.00

Memo Item
Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Joanne F Milburn

Mailing Address 633 Ramona Ave. #72

City Los Osos State CA Zip Code 93402

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 10 / 2016

Transaction ID : SA11AI.4662

Amount of Each Receipt this Period
 250.00

Memo Item
Contribution

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 19 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Parsa Nafisi

Mailing Address 525 Nelson Rising Lane
Apt. 312

City San Francisco State CA Zip Code 94258

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

Name of Employer n/a Occupation Student

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2016

Transaction ID : SA11AI.4725

Amount of Each Receipt this Period
 15.00

Memo Item
Paid through NationBuilder

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

Mailing Address 520 S. Grand Ave.

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3955.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2016

Transaction ID : SA11AI.4822

Amount of Each Receipt this Period
 25.00

Memo Item
Total earmarked through conduit: PAC limit not affected

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

Mailing Address 520 S. Grand Ave.

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4545.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2016

Transaction ID : SA11AI.4760

Amount of Each Receipt this Period
 590.00

Memo Item
Total earmarked through conduit: PAC limit not affected

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

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

615.00

**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 20 OF 59
	<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)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
NationBuilder

Mailing Address 520 S. Grand Ave.

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **7270.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : SA11AI.4761

Amount of Each Receipt this Period
2725.00

Memo Item
 Total earmarked through conduit: PAC limit not affected

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

Mailing Address 520 S. Grand Ave.

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **7820.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Transaction ID : SA11AI.4762

Amount of Each Receipt this Period
550.00

Memo Item
 Total earmarked through conduit: PAC limit not affected

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

Mailing Address 520 S. Grand Ave.

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **8910.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 05 / 2016

Transaction ID : SA11AI.4763

Amount of Each Receipt this Period
1090.00

Memo Item
 Total earmarked through conduit: PAC limit not affected

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

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

4365.00

**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 21 OF 59
	<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)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
NationBuilder

Mailing Address 520 S. Grand Ave.

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **9605.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 11 / 2016

Transaction ID : SA11AI.4764

Amount of Each Receipt this Period
695.00

Memo Item
 Total earmarked through conduit: PAC limit not affected

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

Mailing Address 520 S. Grand Ave.

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **10470.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : SA11AI.4823

Amount of Each Receipt this Period
865.00

Memo Item
 Total earmarked through conduit: PAC limit not affected

C. Full Name (Last, First, Middle Initial)
Paul Obertone

Mailing Address PO Box 64

City Seabeck State WA Zip Code 98380

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

Name of Employer Occupation
 CHI Registered Nurse

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2016

Transaction ID : SA11AI.4701

Amount of Each Receipt this Period
10.00

Memo Item
 Paid through NationBuilder

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

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

1560.00

**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 22 OF 59
	<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)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Tomas Ostrander

Mailing Address 340 Meadowhaven Way

City Milpitas State CA Zip Code 95035

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

Name of Employer Resources IT Occupation IT Operations Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : SA11AI.4733

Amount of Each Receipt this Period
 25.00

Memo Item
 Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Steve Pax

Mailing Address 426 Woodbridge St.

City San Luis Obispo State CA Zip Code 93401

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2016

Transaction ID : SA11AI.4715

Amount of Each Receipt this Period
 50.00

Memo Item
 Paid through NationBuilder

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

Mailing Address 2211 N 1st Street

City San Jose State CA Zip Code 95131

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 290.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2016

Transaction ID : SA11AI.4824

Amount of Each Receipt this Period
 20.00

Memo Item
 Total earmarked through conduit; PAC limit not affected

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

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

20.00

**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 23 OF 59
	<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)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Paypal

Mailing Address 2211 N 1st Street

City San Jose State CA Zip Code 95131

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **310.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2016

Transaction ID : SA11AI.4828

Amount of Each Receipt this Period
 20.00

Memo Item
 Total earmarked through conduit; PAC limit not affected

B. Full Name (Last, First, Middle Initial)
Ruth Picon

Mailing Address 1400 Solano Ave.
Apt 9

City Albany State CA Zip Code 94706

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

Name of Employer Occupation
Not employed Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : SA11AI.4598

Amount of Each Receipt this Period
 20.00

Memo Item
 Earmarked through ActBlue

C. Full Name (Last, First, Middle Initial)
Tori Poppenheimer

Mailing Address 5060 Pineknolls Dr.

City Cambria State CA Zip Code 93428

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

Name of Employer Occupation
Amerlux Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2016

Transaction ID : SA11AI.4673

Amount of Each Receipt this Period
 100.00

Memo Item
 Paid through NationBuilder

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

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

20.00

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

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

FOR LINE NUMBER: PAGE 24 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

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

Mailing Address 1550 Hillcrest Rd.

City Santa Barbara State CA Zip Code 93103

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

Name of Employer Self-Employed Occupation Actor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2016

Transaction ID : SA11AI.4658

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
 Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Thomas F. Rippner

Mailing Address 6448 Squire Ct.

City San Luis Obispo State CA Zip Code 93401

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

Name of Employer Lymburg Eye Surgery Occupation Optomologist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2016

Transaction ID : SA11AI.4681

Amount of Each Receipt this Period
 _____ 200.00

Memo Item
 Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Susan Ross

Mailing Address 402 Ocean View Ave.

City Grover Beach State CA Zip Code 93433

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

Name of Employer Self-Employed Occupation Pharmaceutical Research

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2016

Transaction ID : SA11AI.4679

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
 Paid through NationBuilder

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

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

_____ 0.00

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

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

FOR LINE NUMBER: PAGE 25 OF 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Carol Rowsemitt

Mailing Address 3045 Ardilla Rd.

City Atascadero State CA Zip Code 93422

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

Name of Employer Self-Employed Occupation Nurse

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : SA11AI.4731

Amount of Each Receipt this Period
800.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Lynn Sarko

Mailing Address 5350 S. Kenyon St.

City Seattle State WA Zip Code 98118

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

Name of Employer Keller Rohrback LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 16 / 2016

Transaction ID : SA11AI.4669

Amount of Each Receipt this Period
2700.00

Memo Item Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Erich Spencer

Mailing Address 702 Scarlett Dr.

City Towson State MD Zip Code 21286

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

Name of Employer Cendex Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **760.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 11 / 2016

Transaction ID : SA11AI.4742

Amount of Each Receipt this Period
5.00

Memo Item Paid through NationBuilder

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 59
	<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)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Galen Stucky

Mailing Address 973 W. Campus Lane

City Santa Barbara State CA Zip Code 93117

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

Name of Employer University of California Occupation Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.4686

Amount of Each Receipt this Period
 _____ 50.00

Memo Item
Paid through NationBuilder

B. Full Name (Last, First, Middle Initial)
Sharon Sutliff

Mailing Address 1227 Sydney St.

City San Luis Obispo State CA Zip Code 93401

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2016

Transaction ID : SA11AI.4717

Amount of Each Receipt this Period
 _____ 25.00

Memo Item
Paid through NationBuilder

C. Full Name (Last, First, Middle Initial)
Jason Toby

Mailing Address 32 Reedsdale St.

City Boston State MA Zip Code 01234

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2016

Transaction ID : SA11AI.4719

Amount of Each Receipt this Period
 _____ 5.00

Memo Item
Paid through NationBuilder

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

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

_____ 0.00

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

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

FOR LINE NUMBER: PAGE 27 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2016

Transaction ID : SA11AI.4588

Amount of Each Receipt this Period
25.00

Memo Item
Earmarked through ActBlue

B. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : SA11AI.4590

Amount of Each Receipt this Period
25.00

Memo Item
Earmarked through ActBlue

C. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 13 / 2016

Transaction ID : SA11AI.4591

Amount of Each Receipt this Period
10.83

Memo Item
Earmarked through ActBlue

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

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

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 28 OF 59
	<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)
Ostrander For Congress

A. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 14 / 2016

Transaction ID : SA11AI.4592

Amount of Each Receipt this Period
14.18

Memo Item
Earmarked through ActBlue

B. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : SA11AI.4593

Amount of Each Receipt this Period
4.00

Memo Item
Earmarked through ActBlue

C. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : SA11AI.4596

Amount of Each Receipt this Period
50.00

Memo Item
Earmarked through ActBlue

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

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

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 29 OF 59
	<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)
Ostrander For Congress

A. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 16 / 2016

Transaction ID : SA11AI.4602

Amount of Each Receipt this Period
28.78

Memo Item
Earmarked through ActBlue

B. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2016

Transaction ID : SA11AI.4603

Amount of Each Receipt this Period
9.79

Memo Item
Earmarked through ActBlue

C. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Transaction ID : SA11AI.4604

Amount of Each Receipt this Period
19.91

Memo Item
Earmarked through ActBlue

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 30 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : SA11AI.4605
 Amount of Each Receipt this Period
 13.32
 Memo Item
 Earmarked through ActBlue

B. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2016
Transaction ID : SA11AI.4606
 Amount of Each Receipt this Period
 14.15
 Memo Item
 Earmarked through ActBlue

C. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016
Transaction ID : SA11AI.4607
 Amount of Each Receipt this Period
 10.00
 Memo Item
 Earmarked through ActBlue

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

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 31 OF 59
	<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)
Ostrander For Congress

A. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 26 / 2016

Transaction ID : SA11AI.4608

Amount of Each Receipt this Period
13.00

Memo Item
 Earmarked through ActBlue

B. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Transaction ID : SA11AI.4609

Amount of Each Receipt this Period
8.62

Memo Item
 Earmarked through ActBlue

C. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : SA11AI.4610

Amount of Each Receipt this Period
4.64

Memo Item
 Earmarked through ActBlue

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 32 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt 04 / 30 / 2016
Transaction ID : SA11AI.4615
 Amount of Each Receipt this Period 4.44
 Memo Item
 Earmarked through ActBlue

B. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt 05 / 01 / 2016
Transaction ID : SA11AI.4616
 Amount of Each Receipt this Period 4.23
 Memo Item
 Earmarked through ActBlue

C. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt 05 / 02 / 2016
Transaction ID : SA11AI.4617
 Amount of Each Receipt this Period 47.36
 Memo Item
 Earmarked through ActBlue

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

0.00

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

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

FOR LINE NUMBER: PAGE 33 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2016
Transaction ID : SA11AI.4618
 Amount of Each Receipt this Period
 12.66
 Memo Item
 Earmarked through ActBlue

B. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2016
Transaction ID : SA11AI.4619
 Amount of Each Receipt this Period
 17.56
 Memo Item
 Earmarked through ActBlue

C. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2016
Transaction ID : SA11AI.4620
 Amount of Each Receipt this Period
 12.05
 Memo Item
 Earmarked through ActBlue

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

0.00

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

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

FOR LINE NUMBER: PAGE 34 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2016

Transaction ID : SA11AI.4621

Amount of Each Receipt this Period
 17.45

Memo Item
Earmarked through ActBlue

B. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2016

Transaction ID : SA11AI.4622

Amount of Each Receipt this Period
 3.42

Memo Item
Earmarked through ActBlue

C. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2016

Transaction ID : SA11AI.4623

Amount of Each Receipt this Period
 22.00

Memo Item
Earmarked through ActBlue

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 35 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2016

Transaction ID : SA11AI.4624

Amount of Each Receipt this Period
 2.96

Memo Item
Earmarked through ActBlue

B. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : SA11AI.4625

Amount of Each Receipt this Period
 3.66

Memo Item
Earmarked through ActBlue

C. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2016

Transaction ID : SA11AI.4626

Amount of Each Receipt this Period
 6.55

Memo Item
Earmarked through ActBlue

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 36 OF 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Ostrander For Congress

A. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2016
Transaction ID : SA11AI.4627
 Amount of Each Receipt this Period
 10.61
 Memo Item
 Earmarked through ActBlue

B. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2016
Transaction ID : SA11AI.4628
 Amount of Each Receipt this Period
 9.99
 Memo Item
 Earmarked through ActBlue

C. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2016
Transaction ID : SA11AI.4629
 Amount of Each Receipt this Period
 4.77
 Memo Item
 Earmarked through ActBlue

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

0.00

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

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

FOR LINE NUMBER: PAGE 37 OF 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Ostrander For Congress

A. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016
Transaction ID : SA11AI.4630
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Earmarked through ActBlue

B. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016
Transaction ID : SA11AI.4632
 Amount of Each Receipt this Period
 16.38
 Memo Item
 Earmarked through ActBlue

C. Unitemized Contribution
 Full Name (Last, First, Middle Initial)
 Mailing Address n/a
 City n/a State CA Zip Code 00000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 110.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2016
Transaction ID : SA11AI.4633
 Amount of Each Receipt this Period
 17.00
 Memo Item
 Earmarked through ActBlue

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

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 38 OF 59
	<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)
Ostrander For Congress

A. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : SA11AI.4634

Amount of Each Receipt this Period
 15.42

Memo Item
Earmarked through ActBlue

B. Unitemized Contribution

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **110.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : SA11AI.4635

Amount of Each Receipt this Period
 1.00

Memo Item
Earmarked through ActBlue

C. Mary J Wood

Full Name (Last, First, Middle Initial)
Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **40.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2016

Transaction ID : SA11AI.4643

Amount of Each Receipt this Period
 20.00

Memo Item
Paid through Paypal

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 39 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
Mary J Wood

Mailing Address n/a

City n/a State CA Zip Code 00000

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

Name of Employer n/a Occupation n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
40.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2016

Transaction ID : SA11Al.4827

Amount of Each Receipt this Period
20.00

Memo Item
Paid through Paypal

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

Memo Item

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

Memo Item

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

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

0.00

8973.98

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

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

FOR LINE NUMBER: PAGE 40 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ostrander For Congress

A. Full Name (Last, First, Middle Initial)
William Ostrander

Mailing Address 1996 Sycamore Canyon Rd.

City San Luis Obispo State CA Zip Code 93405

FEC ID number of contributing federal political committee. **C H6CA24287**

Name of Employer Ostrander Grass Hay Occupation Farmer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
15450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA13A.4769

Amount of Each Receipt this Period
2100.00

Memo Item
 Personal Loan

B. Full Name (Last, First, Middle Initial)
William Ostrander

Mailing Address 1996 Sycamore Canyon Rd.

City San Luis Obispo State CA Zip Code 93405

FEC ID number of contributing federal political committee. **C H6CA24287**

Name of Employer Ostrander Grass Hay Occupation Farmer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
16950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : SA13A.4770

Amount of Each Receipt this Period
1500.00

Memo Item
 Personal Loan

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

Memo Item

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

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

3600.00

3600.00

**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 41 OF 59	
	<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)
Ostrander For Congress

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2016
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 0.99
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/Type 001	Transaction ID : SB17.4778
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2016
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 8.19
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/Type 001	Transaction ID : SB17.4783
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2016
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 1.94
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/Type 001	Transaction ID : SB17.4785
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 24	

SUBTOTAL of Disbursements This Page (optional).....	11.12
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 42 OF 59			
	<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)
Ostrander For Congress

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement MM / DD / YYYY 05 / 01 / 2016
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 3.80
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Service Fee	Transaction ID : SB17.4788
Candidate Name William Ostrander	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. ActBlue		Date of Disbursement MM / DD / YYYY 05 / 08 / 2016
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 5.39
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Service Fee	Transaction ID : SB17.4790
Candidate Name William Ostrander	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. ActBlue		Date of Disbursement MM / DD / YYYY 05 / 15 / 2016
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 4.23
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Service Fee	Transaction ID : SB17.4792
Candidate Name William Ostrander	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 24	

SUBTOTAL of Disbursements This Page (optional).....	13.42
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 43 OF 59			
	<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)
Ostrander For Congress

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2016
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 1.39
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Service Fee	Transaction ID : SB17.4793
Candidate Name William Ostrander	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. Bulldog Finance Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 1250 Connecticut Ave. NW #200		Amount of Each Disbursement this Period 2500.00
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Fundraising	Transaction ID : SB17.4809
Candidate Name William Ostrander	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. Central Coast Business Services, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 793 Higuera St., Suite 15		Amount of Each Disbursement this Period 100.00
City San Luis Obispo	State CA	
Zip Code 93401	Purpose of Disbursement Bookkeeping Services	Transaction ID : SB17.4811
Candidate Name William Ostrander	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 24		

SUBTOTAL of Disbursements This Page (optional).....	2601.39
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 44 OF 59	
	<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)
Ostrander For Congress

Full Name (Last, First, Middle Initial) A. Community Environmental Council		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016
Mailing Address 26 West Anapamu St. 2nd Floor		Amount of Each Disbursement this Period 275.00
City Santa Barbara State CA Zip Code 93101	Purpose of Disbursement Booth for Earth Day	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/Type 007	Transaction ID : SB17.4795
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. Crotty Consulting Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016
Mailing Address 8778 Spectrum Center Blvd. Unit B141		Amount of Each Disbursement this Period 336.60
City San Diego State CA Zip Code 92123	Purpose of Disbursement Commission on Advertising	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/Type 004	Transaction ID : SB17.4775
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. CRS		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 880 Via Esteban, Suite B		Amount of Each Disbursement this Period 231.12
City San Luis Obispo State CA Zip Code 93401	Purpose of Disbursement Printing	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/Type 004	Transaction ID : SB17.4805
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 24		

SUBTOTAL of Disbursements This Page (optional).....	842.72
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 45 OF 59			
	<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)
Ostrander For Congress

A. CRS

Full Name (Last, First, Middle Initial)
Mailing Address 880 Via Esteban, Suite B

City San Luis Obispo State CA Zip Code 93401

Purpose of Disbursement Printing

Candidate Name **William Ostrander**

Office Sought: House Senate President
State: CA District: 24

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement: 04 / 28 / 2016

Amount of Each Disbursement this Period: 108.35

Category/Type: 004

Memo Item:

Transaction ID : SB17.4806

B. Jamie Crutchfield Design

Full Name (Last, First, Middle Initial)
Mailing Address 780 Marina St.

City Morro Bay State CA Zip Code 93442

Purpose of Disbursement Web & Graphic Design

Candidate Name **William Ostrander**

Office Sought: House Senate President
State: CA District: 24

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement: 04 / 01 / 2016

Amount of Each Disbursement this Period: 450.00

Category/Type: 001

Memo Item:

Transaction ID : SB17.4819

c. Jamie Crutchfield Design

Full Name (Last, First, Middle Initial)
Mailing Address 780 Marina St.

City Morro Bay State CA Zip Code 93442

Purpose of Disbursement Business Cards Printing

Candidate Name **William Ostrander**

Office Sought: House Senate President
State: CA District: 24

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement: 05 / 02 / 2016

Amount of Each Disbursement this Period: 545.20

Category/Type: 004

Memo Item:

Transaction ID : SB17.4807

SUBTOTAL of Disbursements This Page (optional) 1103.55

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 46 OF 59	
	<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)
Ostrander For Congress

Full Name (Last, First, Middle Initial) A. Jamie Crutchfield Design		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2016
Mailing Address 780 Marina St.		Amount of Each Disbursement this Period 59.88
City Morro Bay	State CA	
Zip Code 93442	Purpose of Disbursement Graphic Design	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/ Type 004	Transaction ID : SB17.4794
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. Mustang Media Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address 1 Grand Ave.		Amount of Each Disbursement this Period 380.00
City San Luis Obispo	State CA	
Zip Code 93407	Purpose of Disbursement Advertising	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/ Type 004	Transaction ID : SB17.4771
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2016
Mailing Address 520 S. Grand Ave.		Amount of Each Disbursement this Period 29.00
City Los Angeles	State CA	
Zip Code 90071	Purpose of Disbursement Online engine fee	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/ Type 003	Transaction ID : SB17.4813
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 24		

SUBTOTAL of Disbursements This Page (optional).....	468.88
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 47 OF 59			
	<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)
Ostrander For Congress

Full Name (Last, First, Middle Initial) A. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 520 S. Grand Ave.		Amount of Each Disbursement this Period 23.29
City Los Angeles	State CA	
Zip Code 90071	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/ Type 001	Transaction ID : SB17.4782
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2016
Mailing Address 520 S. Grand Ave.		Amount of Each Disbursement this Period 102.58
City Los Angeles	State CA	
Zip Code 90071	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/ Type 001	Transaction ID : SB17.4784
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address 520 S. Grand Ave.		Amount of Each Disbursement this Period 21.62
City Los Angeles	State CA	
Zip Code 90071	Purpose of Disbursement Service Fee	<input type="checkbox"/> Memo Item
Candidate Name William Ostrander	Category/ Type 001	Transaction ID : SB17.4786
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 24	

SUBTOTAL of Disbursements This Page (optional).....	147.49
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 48 OF 59			
	<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)
Ostrander For Congress

Full Name (Last, First, Middle Initial) A. NationBuilder			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016	
Mailing Address 520 S. Grand Ave.			Amount of Each Disbursement this Period 43.23	
City Los Angeles	State CA	Zip Code 90071	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Service Fee		Category/Type 001		
Candidate Name William Ostrander		Transaction ID : SB17.4789		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. NationBuilder			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2016	
Mailing Address 520 S. Grand Ave.			Amount of Each Disbursement this Period 29.00	
City Los Angeles	State CA	Zip Code 90071	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Online engine fee		Category/Type 003		
Candidate Name William Ostrander		Transaction ID : SB17.4816		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. NationBuilder			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2016	
Mailing Address 520 S. Grand Ave.			Amount of Each Disbursement this Period 27.24	
City Los Angeles	State CA	Zip Code 90071	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Service Fee		Category/Type 001		
Candidate Name William Ostrander		Transaction ID : SB17.4791		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: CA	District: 24			

SUBTOTAL of Disbursements This Page (optional).....	99.47
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 49 OF 59	
	<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)
Ostrander For Congress

Full Name (Last, First, Middle Initial) A. William Ostrander		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 1996 Sycamore Canyon Rd.		Amount of Each Disbursement this Period 48.00
City San Luis Obispo State CA Zip Code 93405	Purpose of Disbursement Travel Expenses 002 Category/Type	
Candidate Name William Ostrander	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24	Memo Item <input type="checkbox"/> Transaction ID : SB17.4817
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Political Data Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016
Mailing Address 12501 Imperial Highway Suite 200		Amount of Each Disbursement this Period 200.00
City Norwalk State CA Zip Code 90650	Purpose of Disbursement Online Software 003 Category/Type	
Candidate Name William Ostrander	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24	Memo Item <input type="checkbox"/> Transaction ID : SB17.4814
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) c. Political Data Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 12501 Imperial Highway Suite 200		Amount of Each Disbursement this Period 150.00
City Norwalk State CA Zip Code 90650	Purpose of Disbursement Online Software 003 Category/Type	
Candidate Name William Ostrander	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24	Memo Item <input type="checkbox"/> Transaction ID : SB17.4815
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	398.00
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 50 OF 59			
	<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)
Ostrander For Congress

Full Name (Last, First, Middle Initial) A. Spectrum Reach		Date of Disbursement MM / DD / YYYY 05 / 02 / 2016
Mailing Address PO Box 957926		Amount of Each Disbursement this Period 1907.40 <input type="checkbox"/> Memo Item Transaction ID : SB17.4773
City St. Louis	State MO	
Zip Code 63195	Purpose of Disbursement Advertising	Category/ Type 004
Candidate Name William Ostrander	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <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. Spectrum Reach		Date of Disbursement MM / DD / YYYY 05 / 09 / 2016
Mailing Address PO Box 957926		Amount of Each Disbursement this Period 1870.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.4776
City St. Louis	State MO	
Zip Code 63195	Purpose of Disbursement Advertising	Category/ Type 004
Candidate Name William Ostrander	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <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. Spectrum Reach		Date of Disbursement MM / DD / YYYY 05 / 12 / 2016
Mailing Address PO Box 957926		Amount of Each Disbursement this Period 3695.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.4777
City St. Louis	State MO	
Zip Code 63195	Purpose of Disbursement Advertising	Category/ Type 004
Candidate Name William Ostrander	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 24	

SUBTOTAL of Disbursements This Page (optional).....	7472.40
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 51 OF 59			
	<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)
Ostrander For Congress

Full Name (Last, First, Middle Initial) A. Spectrum Reach		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2016
Mailing Address PO Box 957926		Amount of Each Disbursement this Period 1464.50 <input type="checkbox"/> Memo Item
City St. Louis	State MO	
Zip Code 63195	Purpose of Disbursement Advertising	Transaction ID : SB17.4825
Candidate Name William Ostrander	Category/ Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item
City	State	
Zip Code	Purpose of Disbursement	Transaction ID : SB17.4825
Candidate Name	Category/ Type	
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) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item
City	State	
Zip Code	Purpose of Disbursement	Transaction ID : SB17.4825
Candidate Name	Category/ Type	
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:	

SUBTOTAL of Disbursements This Page (optional).....	1464.50
TOTAL This Period (last page this line number only).....	14622.94

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Ostrander For Congress** Transaction ID : **SC/10.4342**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
William Ostrander
 Election: 2016
 Primary
 General
 Other (specify) ▼

Mailing Address
1996 Sycamore Canyon Rd.
 City State ZIP Code
 San Luis Obispo CA 93405

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1350.00	0.00	1350.00

TERMS
 Date Incurred: M 12 / D 22 / Y 2015
 Date Due: M / D / Y none
 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: []

SUBTOTALS This Period This Page (optional)..... ▶ 1350.00
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.

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

NAME OF COMMITTEE (In Full) **Ostrander For Congress** Transaction ID : **SC/10.4525**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
William Ostrander
 Election: 2016
 Primary
 General
 Other (specify) ▼

Mailing Address
 1996 Sycamore Canyon Rd.
 City State ZIP Code
 San Luis Obispo CA 93405

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

TERMS
 Date Incurred: M 01 / D 05 / Y 2016
 Date Due: M / D / Y none
 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: <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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Ostrander For Congress** Transaction ID : **SC/10.4529**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
William Ostrander
 Election: 2016
 Primary
 General
 Other (specify) ▼

Mailing Address
1996 Sycamore Canyon Rd.
 City State ZIP Code
 San Luis Obispo CA 93405

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7500.00	0.00	7500.00

TERMS
 Date Incurred: M 03 / D 19 / Y 2016
 Date Due: M / D / Y none
 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: <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).....	7500.00
TOTALS This Period (last page in this line only).....	<input type="text"/>

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)
Ostrander For Congress

Transaction ID : **SC/10.4530**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
William Ostrander

Election: 2016
 Primary
 General
 Other (specify) ▼

Mailing Address
1996 Sycamore Canyon Rd.

City State ZIP Code
San Luis Obispo CA 93405

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

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
03 / 23 / 2016 none

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)..... ▶ 2000.00

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.

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)
Ostrander For Congress

Transaction ID : **SC/10.4769**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
William Ostrander

Election: 2016
 Primary
 General
 Other (specify) ▼

Mailing Address
1996 Sycamore Canyon Rd.

City State ZIP Code
San Luis Obispo CA 93405

Original Amount of Loan 2100.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2100.00
------------------------------------	------------------------------------	--

TERMS

Date Incurred M 04 / D 04 / Y 2016	Date Due M / D / Y none	Interest Rate 0.00 % (apr)	Secured: <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: []

SUBTOTALS This Period This Page (optional)..... ▶ [] 2100.00

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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Ostrander For Congress** Transaction ID : **SC/10.4770**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
William Ostrander
 Election: 2016
 Primary
 General
 Other (specify) ▼

Mailing Address
1996 Sycamore Canyon Rd.
 City State ZIP Code
 San Luis Obispo CA 93405

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

TERMS
 Date Incurred: M 05 / D 18 / Y 2016
 Date Due: M / D / Y none
 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: []

SUBTOTALS This Period This Page (optional).....	▶	1500.00
TOTALS This Period (last page in this line only).....	▶	16450.00

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-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) Ostrander For Congress	Transaction ID : SC/10.4769.SC1	FEC IDENTIFICATION NUMBER C C00575696
--	---------------------------------	---

LENDING INSTITUTION (LENDER) Full Name William Ostrander - Personal Funds	Amount of Loan 2000.00	Interest Rate (APR) 0.00 %
--	----------------------------------	--------------------------------------

Mailing Address 1996 Sycamore Canyon Rd.	Date Incurred or Established 03 / 23 / 2016	Date Due none	Back Ref SC/10.4769
City State Zip Code San Luis Obispo CA 93405			

A. Has loan been restructured? No Yes If yes, date originally incurred **03 / 23 / 2016**

B. If line of credit, Amount of this Draw: **0.00** Total Outstanding Balance: **0.00**

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____

What is the value of this collateral? **0.00**

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____

What is the estimated value? **0.00**

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account: _____

Date account established: **03 / 23 / 2016** Address: _____

City, State, Zip: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Joni Marie Martinez Signature _____	DATE 05 / 27 / 2016
--	-------------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Joni Marie Martinez Signature Joni Marie Martinez	[Electronically Filed]	DATE 03 / 23 / 2016
Title Treasurer		

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) Ostrander For Congress	Transaction ID : SC/10.4770.SC1	FEC IDENTIFICATION NUMBER C C00575696
--	---------------------------------	---

LENDING INSTITUTION (LENDER) Full Name William Ostrander - Personal Funds	Amount of Loan 2000.00	Interest Rate (APR) 0.00 %
--	----------------------------------	--------------------------------------

Mailing Address 1996 Sycamore Canyon Rd.	Date Incurred or Established 03 / 23 / 2016	Date Due none
City State Zip Code San Luis Obispo CA 93405	Back Ref SC/10.4770	

A. Has loan been restructured? No Yes If yes, date originally incurred **_____ / _____ / _____**

B. If line of credit, Amount of this Draw: **_____** Total Outstanding Balance: **_____**

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____

What is the value of this collateral? **0.00**

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____

What is the estimated value? **0.00**

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account: _____

Date account established: **_____ / _____ / _____** Address: _____

City, State, Zip: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Joni Marie Martinez Signature _____	DATE 05 / 27 / 2016
--	-------------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Joni Marie Martinez Signature <i>Joni Marie Martinez</i>	[Electronically Filed]	DATE 03 / 23 / 2016
Title Treasurer		