FE5AN018

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED FEC MAIL CENTER

2015 APR -9 AM 9: 27

Office Use Only

NAME OF COMMITTEE (in full).	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
LAMAR STERNAD FO	R CONGRESS			
	<u> </u>		1 1 1 1 1 1 1	
ADDRESS (number and street)	19790 SW 101	AVENUE	;	<u> </u>
Check if different than previously reported. (ACC)	CUTLER BAY		FL 33	157 _ 8607
2. FEC IDENTIFICATION N	UMBER ▼	CITY	STATE A.	ZIP CODE
C 00505529		S THIS X NEW REPORT (N) OR	AMENDED (A).	STATE ▼ DISTRICT
4. TYPE OF REPORT (Characterity Reports: April 15 Quarterly July 15 Quarterly October 15 Quarter January 31 Year-E Termination Report	Report (Q1) Report (Q2) orly Report (Q3) and Report (YE) t (TER)	Primary (12P) Convention (12C) Election on D-Day POST-Election Report for General (30G)	General (12G) Special (12S)	in the State of Special (30S) in the State of
5. Covering Period	1 ^m ′ 01° ′ 201	5 [°] through	31°′20	15°°
	_	st of my knowledge and belief it	is true, correct and com	pplete.
Type or Print Name of Treasure Signature of Treasurer			Date **O 4*	°04° ′ ×20′15° °
NOTE: Submission of false, error	neous, or incomplete inform	nation may subject the person sign	ing this Report to the per	nalties of 2 U.S.C. §437g.
Use			F	EC FORM 3

SUMMARY PAGE

of Receipts and Disbursements

Page 2

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

LAMAR	STERNAD	FOR	CONGRESS

Report Covering the Period:

From:









c	Not Contributions (about the plane)	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))	1.47	72.02
	(b) Total Contribution Refunds (from Line 20(d))		
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1.47	72.02
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	1.47	72.02
	(b) Total Offsets to Operating Expenditures (from Line 14)		
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1.47	72.02
3.	Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	27.85	Fr FFF was so

For further information contact:

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

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

FE5AN018

1503-141-1256

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

LAMAR	STERNAD	FOR	CONGRESS

Report Covering the Period:

From:







I. RECEIPTS

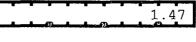
COLUMN A Total This Period

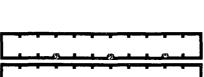
COLUMN B Election Cycle-to-Date

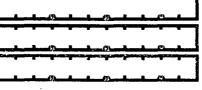
- 11. CONTRIBUTIONS (other than loans) FROM:
 - (a) Individuals/Persons Other Than Political Committees
 - (i) Itemized (use Schedule A).....
 - (ii) Unitemized
 - (iii) TOTAL of contributions from individuals
 - (b) Political Party Committees.....
 - (c) Other Political Committees (such as PACs).....
 - (d) The Candidate.....
 - TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))...
- 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES
- 13. LOANS:
 - (a) Made or Guaranteed by the Candidate.....
 - (b) All Other Loans.....
 - (c) TOTAL LOANS
 - (add Lines 13(a) and (b)).....
- 14. OFFSETS TO OPERATING **EXPENDITURES** (Refunds, Rebates, etc.)
- 15. OTHER RECEIPTS (Dividends, Interest, etc.).....
- 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....

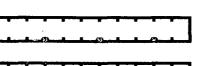
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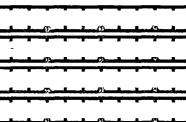
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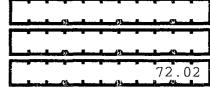








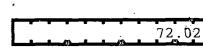




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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

Page **4**

COLUMN A COLUMN B II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 1.47 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate...... (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees..... (b) Political Party Committees..... (c) Other Political Committees (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 0.00 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 25. SUBTOTAL (add Line 23 and Line 24)..... 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 0.00 (subtract Line 26 from Line 25).....

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: (check only one) PAGE 5 OF 8 Use separate schedule(s)

ITE	MIZED RECEIPTS	for each category of the Detailed Summary Page]	11a		1	1b [11	c [11d		
		,,		\Box	12		_	3a	13		14	15
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements made and a	ay not be sold or used by any podress of any political committed	e to	for the	ontr	irp ibi	ose o	of sol	citin suc	g contril	outions nittee.
	NAME OF COMMITTEE (In Full)	•										
/	LAMAR STERNAD FOR CONGRE	ESŚ										
Α.	Full Name (Last, First, Middle Initial) STERNAD, JUSTIN L.				Date of	Re	се	ipt	_		<u>, </u>	
	Mailing Address 19790 SW 101 AVENUE City		01	′		12°]′	2	015	Ÿ		
	CUTLER BAY	FL	<u>33157-8607</u>			_						
	FEC ID number of contributing federal political committee.	С			Amount	of	Ea	ich A	leceip	t this	s Period	47
	Name of Employer	Occupation					7	-	<u>م</u>		V	4/
	CAMBEAN HOSPITALITY	HOTEL	AUDITOR									
	Receipt For: OPEN COMMITTEE 2012 CYCLE Primary General X Other (specify)	Election Cy	72.02		•							
	Full Name (Last, First, Middle Initial)	 -			Data of	Po		int				<u></u>
B.	Mailing Address				Date of	не 	Ce	o o] /	Y	Y 1 Y 1	~]
	City	State	Zip Code		L	.	<u>_</u>			_	······································	
	FEC ID number of contributing federal political committee.	C .			Amount	of	Ea	ach F	leceir	t thi:	s Period	 1
	Name of Employer	Occupation				•	J)		۸		AL	
	Receipt For: Primary General Other (specify)	Election Cy	cle-to-Date									
	Full Name (Last, First, Middle Initial)		-		Date of	Red	ce	ipt				
C.	Mailing Address				мим	1	Γ	b b	/	7	7 8 7 8	7
	City	State	Zip Code	1		1	Ļ					
	FEC ID number of contributing federal political committee.	С			Amount	of	Еa	ich R	eceip	t this	s Period	
	Name of Employer	Occupation			L_		j.				N	(Alta
	Receipt For: Primary General Other (specify)	Election Cy	cle-to-Date									
SI	UBTOTAL of Receipts This Page (optional)											n
	OTAL This Period (last page this line number of										1.	47

SCHEDULE B (FEC Form 3)

FOR

LINE NUMBE	R: (PAGE	_ 6	OF	8
ck only one)					
X 17	18		19a		19
20a	20ь		20c		21

ITI	EMIZED DIS	BURSEMENTS		for each category Detailed Summar	of the	(check only one) X 17
						person for the purpose of soliciting contributions tee to solicit contributions from such committee.
·	NAME OF COMMI	_ ,				
	LAMAR STE	RNAD FOR CONGE	RESS			
_	Full Name (Last, F	irst, Middle Initial)			.	
A.	USPS					Date of Disbursement
	Mailing Address	186th Street				01 / 12 / 2015
	City		State	Zip Code		Amount of Each Disbursement this Period
	MIAMI Purpose of Disbur	sement .	FL	33197	والرجيد والالالاد	1.47
	POSTAGE	<u>.</u>			001	8 1/A/1 3 1/A/1 8 1/A/1
	Candidate Name	MAR STERNAD			Category, Type	,
	Office Sought:	, . ,	bursement For	OPEN COMMITTEE 2		
		Senate	Primary	General		
	State: FL	President District: 26	X Other (s	ресну)		
_	Full Name (Last, F					
B.						Date of Disbursement
	Mailing Address					M M / D D / Y Y Y Y
•	City		State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbur	sement				
	Candidate Name				Category/ Type	.
	Office Sought:	House Dis	bursement For		.,,,,,	
		Senate President	Primary Other (s	General		
	State:	District:	U Other (s	pecity)		·
	Full Name (Last, F	irst, Middle Initial)	 			
C.		•				Date of Disbursement
	Mailing Address					M M / D D / Y Y Y Y
	City		State Zi	p Code	-	Amount of Each Disbursement this Period
	Purpose of Disbur	sement				
	Candidate Name				Category/ Type	
	Office Sought:	<u> </u>	bursement For			
		Senate President	Primary Other (s	General pecify)	-	
	State:	District:	<u> </u>	· · ·	<u>.</u>	
SI	UBTOTAL of Disbu	ursements This Page (option	onal)			
_						

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

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

X	13a
	13b

7 OF 8

DANS			Detailed Summary		(check only one)	X 13a 13b
AME OF COMMITTEE (In Full)						
AMAR STERNAD FOR	CONGRESS					
LOAN SOURCE Full Name	(Last, First, Mic	ddle Initial) [PERSO	NAL FUNDS]	I	ction: 2012	
STERNAD, JUSTIN	L.				Primary General	•
Mailing Address 19790 SW 101 AV	 Е.				Other (specify) ▼	
City CUTLER BAY			Code 3157-8607			
Original Amount of Loan	<u>.</u>	Cumulative Paymer	t To Date	Balance	Outstanding at Close of	This Period
3)	3,.60		0.00			3.60
TERMS Date Incurred		Date I	Due Interest	Rate-	Secur	ed:
M04 ' P12 ' Y2	ď1ž Ť	M M / ON /	DEMAND	0.00	1 70 (apr)	es No
List All Endorsers or Guar	antors (if any) t	o Loan Source				<u>es140_</u>
1. Full Name (Last, First, N	liddle Initial)		Name of Employer			
Mailing Address			Occupation			
		·	Amount			
City	State	ZIP Code	Guaranteed Outstanding:		7	
2. Full Name (Last, First, M	ddle Initial)		Name of Employer			
Mailing Address			Occupation			
	·		Amount			
City	State	ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, M	ddle Initial)		Name of Employer			
Mailing Address			Occupation			-
			Amount			-
City	State	ZIP Code	Guaranteed Outstanding:			أسه
4. Full Name (Last, First, Mi	ddle Initial)		Name of Employer			<u> </u>
Mailing Address			Occupation			
			Amount	7-		}
City	State	ZIP Code	Guaranteed Outstanding:			
						
SUBTOTALS This Period This	Page (optional).					3.60
FOTALS This Period (last page	in this line only	/)	·····	ــــــ	(n)	
Carry outstanding balance onl	y to LINE 3, Sch	nedule D, for this line	. If no Schedule D, carry	forward	to appropriate line of	Summary.

SCHEDULE C (FEC Form 3) LC

Use separate schedule(s) for each category of the

PAGE 8 OF 8 FOR LINE NUMBER:

DANS		Detailed Summary P		ne) X 13a 13b
AME OF COMMITTEE (In Full)				
AMAR STERNAD FOR CON	GRESS			
LOAN SOURCE Full Name (Last, I STERNAD, JUSTIN L. Mailing Address	First, Middle Initial) [PERS(DNAL FUNDS]	Election: 2012 X Primary General Other (specify)	· · · · · · · · · · · · · · · · · · ·
19790 SW 101 AVE.				
City CUTLER BAY		Code 3157-8607		
Original Amount of Loan	Cumulative Paymen	t To Date Ba	alance Outstanding at (Close of This Period
Date Incurred MO3 / B30 / 2012	Date of ON	بهستها ليهاوي	0.00 % (apr)	Secured: X Yes No
List All Endorsers or Guarantors (
Full Name (Last, First, Middle Ir	itial)	Name of Employer		
Mailing Address		Occupation		·
·	•	Amount		
City	State ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Ini	tial)	Name of Employer		
Mailing Address		Occupation		
City	State ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer		
Mailing Address		Occupation		
City	State ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer		 -
Mailing Address		Occupation	·	
City	State ZIP Code	Amount Guaranteed Outstanding:		
UBTOTALS This Period This Page (o	ptional)			24.25
OTALS This Period (last page in this	line only)	→ .		27.85
Carry outstanding balance only to LIN	E 3, Schedule D. for this line	e. If no Schedule D. carry fo	rward to appropriate	line of Summary.

TOP AFFE WOLLS IN

AH 9: 27

FEDERAL ELECTION COMMISSION 999 E STREET NW

WASHNUTON, DC 20463

alluahilidgeelligatelidelightsegisellidiggist

19790 SW 101 ANTINE CUTUSH BAY, FL 33157 J. STERNAD

SOABG

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMIN The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail Postmarked 4445	Date of Receipt
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USPS Priority Mail	Postmarked
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USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busine	ess Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
	4/9/15
(3/2015)	DATE PREPARED