

**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

Art Moore for Congress

ADDRESS (number and street)

PO Box 683



Check if different than previously reported. (ACC)

Roseville

CA

95661-0683

2. FEC IDENTIFICATION NUMBER ▼

C

C00559252

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

CA

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
11 / 04 / 2014

in the State of

CA

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2014

through

M M / D D / Y Y Y Y
10 / 15 / 2014

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 Kelly Lawler

Signature of Treasurer Kelly Lawler

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 23 / 2014

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

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 17

Write or Type Committee Name

Art Moore for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	16730	161716.01
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	16730	161716.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	17318.19	163016.64
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	3489.74
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	17318.19	159526.9
8. Cash on Hand at Close of Reporting Period (from Line 27).....	67189.11	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	69731.87	

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)

PAGE 3 / 17

Write or Type Committee Name

Art Moore for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

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).....

6750

121521.24

(ii) Unitemized.....

1980

22809.33

(iii) TOTAL of contributions from individuals ▶

8730

144330.57

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

8000

17385.44

(d) The Candidate.....

0

0

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

16730

161716.01

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0

0

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0

65000

(b) All Other Loans.....

0

0

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0

65000

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0

3489.74

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0

0

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

16730

230205.75

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 17

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17318.19	163016.64
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	17318.19	163016.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	67777.3
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	16730
25. SUBTOTAL (add Line 23 and Line 24).....	84507.3
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17318.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	67189.11

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 17

(check only one)

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

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)

Art Moore for Congress

Full Name (Last, First, Middle Initial)

E. Ken Tokutomi

Mailing Address 239 Center Street

City

Auburn

State

CA

Zip Code

95603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tokutomi & Caruthers, CPA LLP

Occupation

Partner

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : A-CF492

Amount of Each Receipt this Period

150

Full Name (Last, First, Middle Initial)

Ray Pingle

Mailing Address 7140 Steeple Chase Dr

City

Shingle Springs

State

CA

Zip Code

95682

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retried

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : A-CF503

Amount of Each Receipt this Period

150

Full Name (Last, First, Middle Initial)

Patricia Brissenden

Mailing Address 14255 State Route 88

City

Hope Valley

State

CA

Zip Code

96120-9514

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sorensen's Resort

Occupation

Innkeeper/Manager

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2014

Transaction ID : A-CF506

Amount of Each Receipt this Period

250

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

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

550.00

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

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

FOR LINE NUMBER:

PAGE 6 OF 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

Art Moore for Congress

Full Name (Last, First, Middle Initial)

Thomas E Parrington

A.

Mailing Address 15589 Wards Ferry Road

City

Sonora

State

CA

Zip Code

95370-9750

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : A-CF524

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Paige K Stauss

B.

Mailing Address 9724 Wedgewood Place

City

Granite Bay

State

CA

Zip Code

95746-6711

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sutter Health

Occupation

Board of Director

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : A-CF521

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Kevin Hoffman

C.

Mailing Address 42245 ST HUBERTS PL

City

CHANTILLY

State

VA

Zip Code

20152

FEC ID number of contributing
federal political committee.

C

Name of Employer

US ARMY

Occupation

SOLDIER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

775

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : A-CF522

Amount of Each Receipt this Period

100

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

700.00

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 17

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Art Moore for Congress

A. Full Name (Last, First, Middle Initial)
Colusa Indian Community Council

Mailing Address 3730 State Highway 45

City State Zip Code
Colusa CA 95932-4022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M / D D / Y Y Y Y
10 15 2014

Transaction ID : A-CF536

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
Mooretown Rancheria

Mailing Address 1 Alverda Drive

City State Zip Code
Oroville CA 95966-9379

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M / D D / Y Y Y Y
10 06 2014

Transaction ID : A-CF510

Amount of Each Receipt this Period

500

C. Full Name (Last, First, Middle Initial)
Sue Garcia

Mailing Address 1693 Eureka Road #300

City State Zip Code
Roseville CA 95661

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Paul Garcia Investments

Investor

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M / D D / Y Y Y Y
10 02 2014

Transaction ID : A-CF504

Amount of Each Receipt this Period

1500

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

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

4500.00

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

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

FOR LINE NUMBER:

PAGE 8 OF 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

Art Moore for Congress

Full Name (Last, First, Middle Initial)

Patricia A Schifferle

A.

Mailing Address 15652 Alder Creek Road

City

State

Zip Code

Truckee

CA

96161-6842

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Advocates

Occupation

Consultant

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : A-CF493

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

6750.00

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 17

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Art Moore for Congress

A. Full Name (Last, First, Middle Initial)
United Transportation Union Political Action Committee

Mailing Address 24950 Country Club Boulevard
 Suite 340

City State Zip Code
 North Olmsted OH 44070-5333

FEC ID number of contributing
federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
 5000

Date of Receipt

M M / D D / Y Y Y Y
 10 15 2014

Transaction ID : A-CF535

Amount of Each Receipt this Period

5000

B. Full Name (Last, First, Middle Initial)
California Citrus Mutual Political Action Committee

Mailing Address 512 N Kaweah Avenue

City State Zip Code
 Exeter CA 93221-1200

FEC ID number of contributing
federal political committee. **C** C00166355

Name of Employer Occupation

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
 1000

Date of Receipt

M M / D D / Y Y Y Y
 10 14 2014

Transaction ID : A-CF537

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
Dealers Election Action Committee of the National Automobile Dealers Association

Mailing Address 412 1st Street SE

City State Zip Code
 Washington DC 20003-1804

FEC ID number of contributing
federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
 1000

Date of Receipt

M M / D D / Y Y Y Y
 10 15 2014

Transaction ID : A-CF534

Amount of Each Receipt this Period

1000

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

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

7000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 17

☐ 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)
Art Moore for Congress

A. Full Name (Last, First, Middle Initial) Allied Pilots Association PAC		Date of Receipt M M / D D / Y Y Y Y 10 / 04 / 2014	
Mailing Address 14600 Trinity Boulevard Suite 500		Transaction ID : A-CF505	
City Fort Worth	State TX	Zip Code 76155-2559	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C C00267849			
Name of Employer Occupation			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000	
B. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	
C. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional).....		1000.00	
TOTAL This Period (last page this line number only).....		8000.00	

FOR LINE NUMBER:
(check only one)

X	17		18		19a		19b
	20a		20b		20c		21

NAME OF COMMITTEE (In Full)
Art Moore for Congress

A. Stutzman Public Affairs

Date of Disbursement

Amount of Each Disbursement this Period

001

Category/
Type

Transaction ID : B-E-477

Full Name (Last, First, Middle Initial)

Date of Disbursement

City _____ State _____ Zip Code _____

Amount of Each Disbursement this Period

Category/
Type

Candidate Name

State: District:

Date of Disbursement

MM / DD / YY

Mailing Address

City	State	Zip Code
------	-------	----------

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3500.00

17277.37

SCHEDULE C (FEC Form 3)
LOANS

PAGE 14 OF 17

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Art Moore for Congress

Transaction ID : SC/10-L1

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

Arthur S Moore

[PERSONAL FUNDS]

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
301 Gibson Drive
Apt. 2616

City	State	ZIP Code
Roseville	CA	95678-5416

Original Amount of Loan

20000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

20000

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 29 / 2014

Date Due

M M / D D / Y Y Y Y
12/31/2016

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)..... ►

20000.00

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

PAGE 15 OF 17

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Art Moore for Congress

Transaction ID : SC/10-L2

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

Arthur S Moore

[PERSONAL FUNDS]

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
301 Gibson Drive
Apt. 2616

City	State	ZIP Code
Roseville	CA	95678-5416

Original Amount of Loan

20000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

20000

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 25 / 2014

Date Due

M M / D D / Y Y Y Y
12/31/2016

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)..... ▶

20000.00

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

PAGE 16 OF 17

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L3

Art Moore for Congress

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

Arthur S Moore

[PERSONAL FUNDS]

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
301 Gibson Drive
Apt. 2616

City

State

ZIP Code

Roseville

CA

95678-5416

Original Amount of Loan

25000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

25000

TERMS

Date Incurred

M M / D D / Y Y
09 / 29 / 2014

Date Due

M M / D D / Y Y
12/31/2014

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)..... ▶

25000.00

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

65000.00

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 17

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Art Moore for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Redwave Communications LLC

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Design and
Printing

Mailing Address 4019 Ingersoll Avenue

City State

Zip Code

Des Moines

IA

50312-2710

Outstanding Balance Beginning This Period

0

Transaction ID : SD10-DEBT500

Amount Incurred This Period

2100

Payment This Period

0

Outstanding Balance at Close of This Period

2100

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Jeffrey Wyly

Nature of Debt (Purpose):

Administrative/Salary/Overhead: Strategic
Consultant

Mailing Address 186 Poplar Crest Avenue

City State

Zip Code

Thousand Oaks

CA

91320-4055

Outstanding Balance Beginning This Period

13667

Transaction ID : SD10-DEBT475

Amount Incurred This Period

0

Payment This Period

13667

Outstanding Balance at Close of This Period

0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aimoint Inc.

Nature of Debt (Purpose):

Fundraising: Fundraising
Consulting/Postage/MileageMailing Address 1020 12th Street
Apt. 401

City

State

Zip Code

Sacramento

CA

95814-3988

Outstanding Balance Beginning This Period

0

Transaction ID : SD10-DEBT543

Amount Incurred This Period

2631.87

Payment This Period

0

Outstanding Balance at Close of This Period

2631.87

1) **SUBTOTALS** This Period This Page (optional) ▶

4731.87

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

4731.87

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

65000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

69731.87