

**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

Savary for Congress 2014

ADDRESS (number and street)
▼

P.O. Box 5607

Check if different
than previously
reported. (ACC)

Balboa Island

CA

92662

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00558643

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

CA

48

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
06 / 03 / 2014in 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
04 / 01 / 2014

through

M M / D D / Y Y Y Y
05 / 14 / 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 Gary Crummitt

Signature of Treasurer

Gary Crummitt

[Electronically Filed]

Date

M M / D D / Y Y Y Y
05 / 22 / 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 / 16

Write or Type Committee Name

Savary for Congress 2014

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		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))....	7635.00	18745.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	7635.00	18745.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6547.90	18486.49
(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))	6547.90	18486.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	20458.51	
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)	20200.00	

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)

PAGE 3 / 16

Write or Type Committee Name

Savary for Congress 2014

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		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).....**

3600.00

8760.00

(ii) Unitemized.....

2435.00

4385.00

(iii) TOTAL of contributions from individuals ▶

6035.00

13145.00

(b) Political Party Committees.....

0.00

0.00

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

1600.00

5600.00

(d) The Candidate.....

0.00

0.00

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

7635.00

18745.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

200.00

20200.00

(b) All Other Loans.....

0.00

0.00

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

200.00

20200.00

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

0.00

0.00

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

0.00

0.00

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

7835.00

38945.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 16

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6547.90	18486.49
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) ►	6547.90	18486.49

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	19171.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	7835.00
25. SUBTOTAL (add Line 23 and Line 24).....	27006.41
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6547.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	20458.51

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 16

(check only one)

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

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NAME OF COMMITTEE (In Full)

Savary for Congress 2014

Full Name (Last, First, Middle Initial)

Donald L. Abrams

Mailing Address 315 Marine Ave.

City

Balboa Island

State

CA

Zip Code

92662

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coastal PropertiesOccupation
Realtor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Transaction ID : INCA91

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Bonnie Castrey

Mailing Address P.O.Box 5007

City

Seal Beach

State

CA

Zip Code

92615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

Transaction ID : INCA80

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Donna K. Dawson

Mailing Address 6 Canyon Terr.

City

Newport Coast

State

CA

Zip Code

92657

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Transaction ID : INCA89

Amount of Each Receipt this Period

100.00

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

1100.00

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: PAGE 6 OF 16
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Savary for Congress 2014

Full Name (Last, First, Middle Initial) A. Barbara L. Degroot			Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 217 Jasmine Ave.			Transaction ID : INCA72	
City Corona Del Mar	State CA	Zip Code 92625	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Occupation Volunteer		
Name of Employer Orange County Museum of Art		Election Cycle-to-Date 500.00		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)				

Full Name (Last, First, Middle Initial) B. Lynn Kasper			Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2014	
Mailing Address 17 San Mateo Way			Transaction ID : INCA92	
City Corona Del Mar	State CA	Zip Code 92625	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Occupation Retired		
Name of Employer N/A		Election Cycle-to-Date 500.00		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)				

Full Name (Last, First, Middle Initial) C. Linda L. Markman			Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2014	
Mailing Address 31 Club View Ln.			Transaction ID : INCA96	
City Rolling Hills Esta	State CA	Zip Code 90274	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Occupation		
Name of Employer		Election Cycle-to-Date 250.00		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)				

SUBTOTAL of Receipts This Page (optional).....			1250.00	
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: PAGE 7 OF 16
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Savary for Congress 2014

A. Full Name (Last, First, Middle Initial) Cheryl Symmes		Date of Receipt M M / D D / Y Y Y Y 04 / 10 / 2014	
Mailing Address		Transaction ID : INCA43	
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer		Occupation	
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 1000.00	
B. Full Name (Last, First, Middle Initial) David J. Taborrelli		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 314 Larkspur Ave.		Transaction ID : INCA66	
City	State	Zip Code	
Corona Del Mar CA 92625			
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer		Occupation	
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 250.00	
C. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
Name of Employer		Occupation	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional).....		1250.00	
TOTAL This Period (last page this line number only).....		3600.00	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Savary for Congress 2014

Full Name (Last, First, Middle Initial)

Canyon Democrats

Mailing Address P.O.Box 886

City

Trabuco Canyon

State

CA

Zip Code

92678

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		06		2014

Transaction ID : INCA81

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Democratic Club of West Orange County

Mailing Address P.O. Box 20036

City

Fountain Valley

State

CA

Zip Code

92728

FEC ID number of contributing
federal political committee.

C C00444117

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		02		2014

Transaction ID : INCA48

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Leading Orange County PAC

Mailing Address 3040 E. Meadow Grove Rd.

City

Orange

State

CA

Zip Code

92867

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		14		2014

Transaction ID : INCA83

Amount of Each Receipt this Period

1000.00

1600.00

1600.00

SUBTOTAL of Receipts This Page (optional).....**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 9 OF 16

☐ 11a 12	☒ 11b 13a	☐ 11c 13b	☐ 11d 14	☐ 15
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NAME OF COMMITTEE (In Full)

Savary for Congress 2014

Full Name (Last, First, Middle Initial)

Suzanne M. Savary

Mailing Address 118 Marine Ave.

City

Newport Beach

State

CA

Zip Code

92662

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired Professor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

20200.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 14 / 2014

Transaction ID : PAYA85

Amount of Each Receipt this Period

200.00

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 ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / 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 ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / 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).....

200.00

200.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 16

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Savary for Congress 2014

Full Name (Last, First, Middle Initial)

A. Crummitt & Associates

Mailing Address 525 E. Seaside Way, #101-C

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

City	State	Zip Code
Long Beach	CA	90802

Amount of Each Disbursement this Period

1280.00

Purpose of Disbursement
Treasurer Services

001

Transaction ID : EXPB64

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Election Digest P2014

Mailing Address 13701 Riverside Dr., #604

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

City	State	Zip Code
Sherman Oaks	CA	91423

Amount of Each Disbursement this Period

1740.00

Purpose of Disbursement
Slate Mailer

006

Transaction ID : EXPB62

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Voter Guide Slate Cards

Mailing Address 6285 E. Spring St., #202

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

City	State	Zip Code
Long Beach	CA	90808

Amount of Each Disbursement this Period

1785.00

Purpose of Disbursement
Slate Mailer

006

Transaction ID : EXPB61

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

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

4805.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 16

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Savary for Congress 2014

Full Name (Last, First, Middle Initial)

A. Voter Newsletter

Mailing Address 15021 Ventura Blvd., #530

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

City	State	Zip Code
Sherman Oaks	CA	91403

Amount of Each Disbursement this Period

1700.00

Purpose of Disbursement
Slate Mailer

006

Transaction ID : EXPB63

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify)	

State:

District:

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

1700.00

6505.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 12 OF 16

FOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC45

Savary for Congress 2014

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

Suzanne M. Savary

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
118 Marine Ave.

City

State

ZIP Code

Newport Beach

CA

92662

Original Amount of Loan

8286.96

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

8286.96

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 31 / 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)..... ►

8286.96

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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : PAYC45

LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 14 OF 16

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 : PAYC55

Savary for Congress 2014

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

Suzanne M. Savary

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
118 Marine Ave.

City

State

ZIP Code

Newport Beach

CA

92662

Original Amount of Loan

11713.04

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

11713.04

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 31 / 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)..... ►

11713.04

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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : PAYC55

LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 16 OF 16

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 : PAYC85

Savary for Congress 2014

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

Suzanne M. Savary

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
118 Marine Ave.

City

State

ZIP Code

Newport Beach

CA

92662

Original Amount of Loan

200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 14 / 2014

Date Due

M M / D D / Y Y Y 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)

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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)..... ►

200.00

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

20200.00

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