PUELI DIVILLIAN RE

2012 OCT 25 AM 9: 52

9 of 9 got overlooked. Here it is Thank you phan M

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FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED

2012 OCT 25 AM 9: 01

FEC FORM 3

(Revised 02/2003)

	For An Authorized Committee					FFC M Office Use Only				
. NAME OF TYPE OR PRIN COMMITTEE (in full)		Example: If typing, type over the lines.			12FE4M5					
MARQUEZ FO	R. CONC	FRESS.			!					
	!				ı					
ADDRESS (number and street)	P. O.	BOX 14	44				1			
Check if different	<u> </u>	·				<u>-</u> 1	<u>i</u>		<u> </u>	
than previously reported. (ACC)	JACK.	ريده کرا			mI	492	20A-			
FEC IDENTIFICATION NUMBER ▼ CD0522268		CITY		STATE		ZIP CODE				
		3. IS THIS REPORT	X	NEW (N)	OR	AMEN . (A)	IDED	STATE ▼	DISTRICT	
4. TYPE OF REPORT (C) (a) Quarterly Reports:	noose One)	(b) 12-Day P	RE-Electio	n Repoi	nt for the:					
April 15 Quarterly Report (Q1)		Primary (12P)		General (12G) Runoff (off (12R)				
July 15 Quarterly Report (Q2)		Convention (12C)			Special (12S)					
Cottober 15 Quarterly Report (Q3)		Election	on Ï	i	06	2012	2	in the State of	M 1	
January 31 Year-E	nd Report (YE)	(c) 30-Day P	OST-Elect	ion Rep	ort for the	a :	•			
		<i>)</i>	General (30G)			Runoff (30R)		Special (30S)		
Y Termination Report	t (TER)	Election	on Ï	ť	06	2012	2	in the State of	m (
5. Covering Period $\ddot{\ddot{\mathcal{O}}}$	5 15	2012	thi	ough	<i>;</i> (5 <i>j š</i>	Żυ	i 2		
I certify that I have examined th	\sim 1	4/1			elief it is	true, correct ar	nd comple	ete.	<u> </u>	
Type or Print Name of Treasure	Kube	~ MAR	2465	-						
Signature of Treasurer	when Mary	mez.				Date / d	à Ì	5 ż	o i Ż	
NOTE: Submission of false, error	legus, or incompl	– lete information m	av suhiect	the ners	on signing	this Report to	the penalt	ies of 2 U.S	C. 8437a	

Office

Use

Only

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

(Use separate schedule(s)

PAGE FOR LINE NUMBER:

	9
X	10

EDIS AND OBLIGATIONS	for each (check only one) 9			
xcluding Loans	numbered line) X 10			
NAME OF COMMITTEE (In Full) MARQUEZ FOR CO	ngress			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Marovez Roben	Nature of Debt (Purpose): LOAN TO MY OWN CAMPAIGN.			
MARQUEZ Roben Mailing Address P.O. Box 1444 City State Zip Code	-			
Outstanding Balance Beginning This Period Amount Incurred This Period Payment This				
56512 - 57	0,0,0 5,65.1Z			
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):			
Mailing Address				
City State Zip Code				
Outstanding Balance Beginning This Period Amount Incurred This Period Payment This				
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):			
Mailing Address				
City State Zip Co	de			
Outstanding Balance Beginning This Period				
Amount Incurred This Period Payment This	Period Outstanding Balance at Close of This Period			
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page this line number only)				
TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery **Date of Receipt** 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 or Postmarked Other (Specify):

DATE PREPARED

(3/2005)