

**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

Kerri Condley for Congress

ADDRESS (number and street)

5429 Madison Avenue

Check if different  
than previously  
reported. (ACC)

Sacramento

CA

95841

2. FEC IDENTIFICATION NUMBER ▼

C

C00543942

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

CA

42

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 Rita Copeland

Signature of Treasurer

Rita Copeland

[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)

Write or Type Committee Name

Kerri Condley for Congress

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))....	1384.07	25738.07
(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)) .....	1384.07	25738.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	2000.37	25453.42
(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)) .....	2000.37	25453.42
8. Cash on Hand at Close of Reporting Period (from Line 27).....	530.52	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	13163.07	

## 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 / 45

Write or Type Committee Name

**Kerri Condley for Congress**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
04 / 01 / 2014

To:

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

**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).....**

724.07

16274.07

**(ii) Unitemized .....**

660.00

6464.00

**(iii) TOTAL of contributions  
from individuals .....**

1384.07

22738.07

**(b) Political Party Committees.....**

0.00

0.00

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

0.00

3000.00

**(d) The Candidate .....**

0.00

0.00

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

1384.07

25738.07

**12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....**

0.00

0.00

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

0.00

1495.00

**(b) All Other Loans.....**

0.00

0.00

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

0.00

1495.00

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

0.00

0.00

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

0.04

0.87

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

1384.11

27233.94

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 45

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2000.37	25453.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	350.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	350.00
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	900.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	2000.37	26703.42

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1146.78
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1384.11
25. SUBTOTAL (add Line 23 and Line 24).....	2530.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2000.37
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	530.52

# **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 45

(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)

Kerri Condley for Congress

Full Name (Last, First, Middle Initial)

Michele Campbell

Mailing Address 16186 Pick Place

City

Riverside

State

CA

Zip Code

92504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Not Employed

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

449.07

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		24		2014

Transaction ID : NONA868

Amount of Each Receipt this Period

124.07

In-Kind-Candy for Event

Full Name (Last, First, Middle Initial)

Douglas MacLaughlin

Mailing Address 5071 Hallwood Avenue

City

Riverside

State

CA

Zip Code

92506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mullin TBGOccupation  
Project Manager

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		30		2014

Transaction ID : IDTA92

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address 14 Arrow Street, Suite 11

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		04		2014

Transaction ID : INCA833IDTA92

Amount of Each Receipt this Period

50.00

[MEMO ITEM]

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

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

174.07

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : NONA868  
In-Kind

Form/Schedule: SA11AI  
Transaction ID: IDTA92  
Earmarked through ActBlue

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : INCA833IDTA92

Total earmarked through conduit PAC limit not affected

Form/Schedule:  
Transaction ID:

# **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 45

(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)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

**Maureen Macomber**

Mailing Address 1656 Melrose Drive

City

Corona

State

CA

Zip Code

92880

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

300.00

Date of Receipt

**04** / **29** / **2014**

Transaction ID : IDTA90

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Democracy Engine, Inc. PAC**

Mailing Address 850 Quincy Street NW, #402

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing federal political committee.

**C** C00468314

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

9105.00

Date of Receipt

**05** / **07** / **2014**

Transaction ID : INCA831IDTA90

Amount of Each Receipt this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**Sandy Pina**

Mailing Address 24054 Sweet William Lane

City

Murrieta

State

CA

Zip Code

92562

FEC ID number of contributing federal political committee.

**C**

Name of Employer

RCR Group Companies

Occupation

Chairman of the Board

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

**04** / **28** / **2014**

Transaction ID : IDTA88

Amount of Each Receipt this Period

250.00

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

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

350.00



: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : IDTA90

Earmarked through Democracy Engine, Inc. PAC

Form/Schedule: SA11AI  
Transaction ID: INCA831IDTA90

Total earmarked through conduit PAC limit not affected

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : IDTA88

Earmarked through Democracy Engine, Inc. PAC

Form/Schedule:  
Transaction ID:

# **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 45

(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)

Kerri Condley for Congress

Full Name (Last, First, Middle Initial)

Democracy Engine, Inc. PAC

Mailing Address 850 Quincy Street NW, #402

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C C00468314

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

9105.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2014

Transaction ID : INCA831IDTA88

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Harry Sutton

Mailing Address 1449 Princess Manor Court

City

Chula Vista

State

CA

Zip Code

91911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

Not Employed

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

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

Transaction ID : IDTA93

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Democracy Engine, Inc. PAC

Mailing Address 850 Quincy Street NW, #402

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C C00468314

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

9105.00

Date of Receipt

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

Transaction ID : INCA851IDTA93

Amount of Each Receipt this Period

100.00

[MEMO ITEM]

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

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

100.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA831IDTA88

Total earmarked through conduit PAC limit not affected

Form/Schedule: SA11AI

Transaction ID: IDTA93

Earmarked through Democracy Engine, Inc. PAC

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA851IDTA93

Total earmarked through conduit PAC limit not affected

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 14 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

**Carol Wayne**

Mailing Address 1019 Bayside Cove

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 15 2014

Transaction ID : IDTA87

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Democracy Engine, Inc. PAC**

Mailing Address 850 Quincy Street NW, #402

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C C00468314

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

9105.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 23 2014

Transaction ID : INCA793IDTA87

Amount of Each Receipt this Period

100.00

[MEMO ITEM]

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

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

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

100.00

724.07

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : IDTA87

Earmarked through Democracy Engine, Inc. PAC

Form/Schedule: SA11AI  
Transaction ID: INCA793IDTA87

Total Earmarked Through Conduit PAC Limit not Effected

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

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

FOR LINE NUMBER:

PAGE 16 OF 45

(check only one)

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

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NAME OF COMMITTEE (In Full)

Kerri Condley for Congress

Full Name (Last, First, Middle Initial)

Kerri Condley

Mailing Address 22877 Sweetbay Drive

City

Wildomar

State

CA

Zip Code

92595

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CandidateOccupation  
Candidate

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

9171.39

Date of Receipt

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

Transaction ID : PAYA859

Amount of Each Receipt this Period

59.87

Fuel and Tolls - To Be Reimbursed

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Kerri Condley

Mailing Address 22877 Sweetbay Drive

City

Wildomar

State

CA

Zip Code

92595

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CandidateOccupation  
Candidate

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

9171.39

Date of Receipt

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

Transaction ID : PAYA860

Amount of Each Receipt this Period

78.66

Toner, Food and Beverages - To Be Reimbursed

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Kerri Condley

Mailing Address 22877 Sweetbay Drive

City

Wildomar

State

CA

Zip Code

92595

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CandidateOccupation  
Candidate

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

9171.39

Date of Receipt

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

Transaction ID : PAYA861

Amount of Each Receipt this Period

161.71

Food, Beverages, and Decorations - To Be Reimbursed

[MEMO ITEM]

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

0.00

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

0.00



**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 17 OF 45

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

**A. 7-Eleven**

Mailing Address 32060 Clinton Keith Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		25		2014

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

12.61
-------

Purpose of Disbursement  
Fuel

002

**Transaction ID : EXPB820**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Arco**

Mailing Address 36228 Hidden Springs Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		05		2014

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

41.52
-------

Purpose of Disbursement  
Fuel

002

**Transaction ID : EXPB763**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Arco**

Mailing Address 36228 Hidden Springs Road

Date of Disbursement

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

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

44.45
-------

Purpose of Disbursement  
Fuel

002

**Transaction ID : EXPB781**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

98.58

**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 18 OF 45

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

**A. Arco**

Mailing Address 36228 Hidden Springs Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

22.33
-------

Purpose of Disbursement  
Fuel

002

Transaction ID : EXPB777

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Arco**

Mailing Address 36228 Hidden Springs Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		18		2014

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

30.36
-------

Purpose of Disbursement  
Fuel

002

Transaction ID : EXPB790

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Arco**

Mailing Address 36228 Hidden Springs Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		23		2014

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

32.95
-------

Purpose of Disbursement  
Fuel

002

Transaction ID : EXPB800

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	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).....

85.64

**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 19 OF 45

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

**A. Arco**

Mailing Address 36228 Hidden Springs Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		25		2014

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

16.30
-------

Purpose of Disbursement  
Fuel

002

**Transaction ID : EXPB818**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Arco**

Mailing Address 36228 Hidden Springs Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2014

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

5.83
------

Purpose of Disbursement  
Fuel

002

**Transaction ID : EXPB817**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Arco**

Mailing Address 36228 Hidden Springs Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2014

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

10.35
-------

Purpose of Disbursement  
Fuel

002

**Transaction ID : EXPB815**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

32.48

**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 20 OF 45

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

**A. Arco**

Mailing Address 36228 Hidden Springs Road

City	State	Zip Code
Wildomar	CA	92595

Purpose of Disbursement  
Fuel

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2014

Amount of Each Disbursement this Period

25.36
-------

Transaction ID : EXPB816

**B. Arco**

Mailing Address 36228 Hidden Springs Road

City	State	Zip Code
Wildomar	CA	92595

Purpose of Disbursement  
Fuel

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2014

Amount of Each Disbursement this Period

4.63
------

Transaction ID : EXPB844

**C. Arco**

Mailing Address 36228 Hidden Springs Road

City	State	Zip Code
Wildomar	CA	92595

Purpose of Disbursement  
Fuel

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		10		2014

Amount of Each Disbursement this Period

31.99
-------

Transaction ID : EXPB845

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

61.98

**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 21 OF 45

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

**A. Arco**

Mailing Address 36228 Hidden Springs Road

Date of Disbursement

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

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

25.35
-------

Purpose of Disbursement  
Fuel

002

Transaction ID : EXPB847

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Arco**

Mailing Address 36228 Hidden Springs Road

Date of Disbursement

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

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

19.47
-------

Purpose of Disbursement  
Fuel

002

Transaction ID : EXPB857

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. Kerri Condley**

Mailing Address 22877 Sweetbay Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

City	State	Zip Code
Wildomar	CA	92595

Amount of Each Disbursement this Period

70.30
-------

Purpose of Disbursement  
Campaign Buttons - To Be Reimbursed

006

Transaction ID : EXPB768

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

115.12

# **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 22 OF 45

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

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NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

## **A. Just Buttons**

Mailing Address 59 School Ground Road, #7

City Branford State CT Zip Code 06405

Purpose of Disbursement  
Campaign Buttons

006

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 16 / 2014

Amount of Each Disbursement this Period

70.30

Transaction ID : PDTB23EXPB768

[MEMO ITEM]

## **B. Kerri Condley**

Mailing Address 22877 Sweetbay Drive

City Wildomar State CA Zip Code 92595

Purpose of Disbursement  
Toner, Food and Beverages - To Be Reimbursed

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 16 / 2014

Amount of Each Disbursement this Period

80.42

Transaction ID : EXPB770

## **c. Best Buy**

Mailing Address 25080 Madison Avenue

City Murrieta State CA Zip Code 92562

Purpose of Disbursement  
Toner

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 16 / 2014

Amount of Each Disbursement this Period

70.88

Transaction ID : PDTB20EXPB770

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

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

80.42

**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 23 OF 45

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

**A. Kerri Condley**

Mailing Address 22877 Sweetbay Drive

City	State	Zip Code
Wildomar	CA	92595

Purpose of Disbursement  
Website Maintenance-To Be Reimbursed

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		25		2014

Amount of Each Disbursement this Period

56.97
-------

Transaction ID : EXPB796

**B. Kerri Condley**

Mailing Address 22877 Sweetbay Drive

City	State	Zip Code
Wildomar	CA	92595

Purpose of Disbursement  
Fuel and Parking-To Be Reimbursed

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		25		2014

Amount of Each Disbursement this Period

68.03
-------

Transaction ID : EXPB798

**C. Kerri Condley**

Mailing Address 22877 Sweetbay Drive

City	State	Zip Code
Wildomar	CA	92595

Purpose of Disbursement  
Campaign Banner-To Be Reimbursed

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2014

Amount of Each Disbursement this Period

35.74
-------

Transaction ID : EXPB805

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

160.74

**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 24 OF 45

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

**A. Signs By Tomorrow**

Mailing Address 1791 Tribute Road

City	State	Zip Code
Sacramento	CA	95815

Purpose of Disbursement  
Campaign Banner

006

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2014

Amount of Each Disbursement this Period

35.74

Transaction ID : PDTB17EXPB805

**[MEMO ITEM]****B. Kerri Condley**

Mailing Address 22877 Sweetbay Drive

City	State	Zip Code
Wildomar	CA	92595

Purpose of Disbursement  
Telephone

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2014

Amount of Each Disbursement this Period

31.23

Transaction ID : EXPB809

**C. Kerri Condley**

Mailing Address 22877 Sweetbay Drive

City	State	Zip Code
Wildomar	CA	92595

Purpose of Disbursement  
Website Maintenance-To Be Reimbursed

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2014

Amount of Each Disbursement this Period

13.03

Transaction ID : EXPB807

**SUBTOTAL** of Disbursements This Page (optional).....

44.26

**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 25 OF 45

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

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NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

## **A. Credo Mobile**

Mailing Address Post Office Box 7015

City State Zip Code  
 San Francisco CA 94120-7015

Purpose of Disbursement  
 Telephone

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 04 / 24 / 2014

Amount of Each Disbursement this Period

96.72

Transaction ID : EXPB795

## **B. Democracy Engine**

Mailing Address 850 Quincy Street NW, # 402

City State Zip Code  
 Washington DC 20011

Purpose of Disbursement  
 Credit Card Processing Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 04 / 09 / 2014

Amount of Each Disbursement this Period

2.07

Transaction ID : EXPB775

## **c. Democracy Engine**

Mailing Address 850 Quincy Street NW, # 402

City State Zip Code  
 Washington DC 20011

Purpose of Disbursement  
 Credit Card Processing Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
 04 / 16 / 2014

Amount of Each Disbursement this Period

6.02

Transaction ID : EXPB773

**SUBTOTAL** of Disbursements This Page (optional).....

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

104.81

**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 26 OF 45

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kerri Condley for Congress

Full Name (Last, First, Middle Initial)

**A. Democracy Engine**

Mailing Address 850 Quincy Street NW, # 402

City	State	Zip Code
Washington	DC	20011

Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		23		2014

Amount of Each Disbursement this Period

7.90
------

Transaction ID : EXPB794

**B. Democracy Engine**

Mailing Address 850 Quincy Street NW, # 402

City	State	Zip Code
Washington	DC	20011

Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2014

Amount of Each Disbursement this Period

16.72
-------

Transaction ID : EXPB832

**c. Democracy Engine**

Mailing Address 850 Quincy Street NW, # 402

City	State	Zip Code
Washington	DC	20011

Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

3.95
------

Transaction ID : EXPB852

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

28.57

**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 27 OF 45

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

Full Name (Last, First, Middle Initial)

**A. NationBuilder**

Mailing Address 448 S. Hill Street, Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2014

City	State	Zip Code
Los Angeles	CA	90013

Amount of Each Disbursement this Period

49.00
-------

Purpose of Disbursement  
Website

001

**Transaction ID : EXPB791**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Scooter Promo LLC**

Mailing Address 5801 Corsica Road

Date of Disbursement

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

City	State	Zip Code
Corpus Christi	TX	78414

Amount of Each Disbursement this Period

100.00
--------

Purpose of Disbursement  
Campaign Logo Design

006

**Transaction ID : EXPB760**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Scooter Promo LLC**

Mailing Address 5801 Corsica Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2014

City	State	Zip Code
Corpus Christi	TX	78414

Amount of Each Disbursement this Period

232.50
--------

Purpose of Disbursement  
Campaign Pom Poms

006

**Transaction ID : EXPB840**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....

381.50

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



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

PAGE 29 OF 45

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 : PAYC52

Kerri Condley for Congress

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

Kerri Condley

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

22877 Sweetbay Drive

City

State

ZIP Code

Wildomar

CA

92595

Original Amount of Loan

200.00

Cumulative Payment To Date

25.00

Balance Outstanding at Close of This Period

175.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
05 / 31 / 2013

Date Due

M M / D D / Y Y Y Y  
11/30/2013

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)..... ►

175.00

**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 30 OF 45

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 : PAYC44

Kerri Condley for Congress

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

Kerri Condley

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

22877 Sweetbay Drive

City

State

ZIP Code

Wildomar

CA

92595

Original Amount of Loan

350.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

350.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 03 / 2013

Date Due

M M / D D / Y Y Y Y  
12/03/2013

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)..... ►

350.00

**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 31 OF 45

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 : PAYC536

Kerri Condley for Congress

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

Kerri Condley

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

22877 Sweetbay Drive

City

State

ZIP Code

Wildomar

CA

92595

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 04 / 2013

Date Due

M M / D D / Y Y Y Y  
09 / 04 / 2013

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)..... ►

500.00

**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 32 OF 45

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 : PAYC171

Kerri Condley for Congress

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

Kerri Condley

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

22877 Sweetbay Drive

City

State

ZIP Code

Wildomar

CA

92595

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 26 / 2013

Date Due

M M / D D / Y Y Y Y  
11/26/2013

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)..... ►

100.00

**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 33 OF 45

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 : PAYC542

Kerri Condley for Congress

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

Kerri Condley

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

22877 Sweetbay Drive

City

State

ZIP Code

Wildomar

CA

92595

Original Amount of Loan

10.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
11 19 / 2013

Date Due

M M / D D / Y Y Y Y  
02/19/2014

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)..... ►

10.00

**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 34 OF 45

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 : PAYC538

Kerri Condley for Congress

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

Kerri Condley

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

22877 Sweetbay Drive

City

State

ZIP Code

Wildomar

CA

92595

Original Amount of Loan

10.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
12 / 04 / 2013

Date Due

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

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)..... ►

10.00

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

1145.00

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 35 OF 45

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

NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

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

**Karen Bell**

Nature of Debt (Purpose):

Website Maintenance

Mailing Address 643 Sandalwood Drive

City State

Zip Code

Riverside

CA

92507

Outstanding Balance Beginning This Period

400.00

Transaction ID : PAYD395

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

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

**Kerri Condley**

Nature of Debt (Purpose):

Fundraising Consulting Services-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

1277.07

Transaction ID : PAYD117

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1277.07

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

**Kerri Condley**

Nature of Debt (Purpose):

Seat Cushion, Toner, Paper, Food and Beverages-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City

State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

158.61

Transaction ID : PAYD273

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

158.61

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

1835.68

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

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

0.00

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

PAGE 36 OF 45

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

NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

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

**Kerri Condley**

Nature of Debt (Purpose):

Event Tickets-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

212.00

Transaction ID : PAYD274

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

212.00

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

**Kerri Condley**

Nature of Debt (Purpose):

Event Tickets-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

160.00

Transaction ID : PAYD275

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

160.00

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

**Kerri Condley**

Nature of Debt (Purpose):

Office Chair-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City

State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

111.76

Transaction ID : PAYD128

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

111.76

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

483.76

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

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

0.00

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

PAGE 37 OF 45

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

NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

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

**Kerri Condley**

Nature of Debt (Purpose):

Lodging to Attend Event-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

483.62

Transaction ID : PAYD276

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

483.62

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

**Kerri Condley**

Nature of Debt (Purpose):

Website Maintenance-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

87.00

Transaction ID : PAYD277

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

87.00

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

**Kerri Condley**

Nature of Debt (Purpose):

Postage, Parking, Food and Beverages-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City

State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

198.58

Transaction ID : PAYD278

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

198.58

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

769.20

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

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

0.00

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

PAGE 38 OF 45

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

NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

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

**Kerri Condley**

Nature of Debt (Purpose):

Website Maintenance-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

70.00

Transaction ID : PAYD279

Amount Incurred This Period

0.00

Payment This Period

70.00

Outstanding Balance at Close of This Period

0.00

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

**Kerri Condley**

Nature of Debt (Purpose):

Lodging to Attend Event-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

89.96

Transaction ID : PAYD280

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

89.96

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

**Kerri Condley**

Nature of Debt (Purpose):

Lodging to Attend Event-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

435.06

Transaction ID : PAYD283

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

435.06

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

525.02

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

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

0.00

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

PAGE 39 OF 45

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

NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

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

**Kerri Condley**Nature of Debt (Purpose):  
Telephone

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

96.40

**Transaction ID : PAYD284**

Amount Incurred This Period

0.00

Payment This Period

31.23

Outstanding Balance at Close of This Period

65.17

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

**Kerri Condley**Nature of Debt (Purpose):  
Internet-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

249.33

**Transaction ID : PAYD285**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

249.33

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

**Kerri Condley**Nature of Debt (Purpose):  
Fundraising Consulting Services-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City

State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

1500.00

**Transaction ID : PAYD241**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

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

1814.50

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

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

0.00

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

PAGE 40 OF 45

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

NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

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

**Kerri Condley**

Nature of Debt (Purpose):

Fuel and Parking-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

68.03

Transaction ID : PAYD545

Amount Incurred This Period

0.00

Payment This Period

68.03

Outstanding Balance at Close of This Period

0.00

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

**Kerri Condley**

Nature of Debt (Purpose):

Fundraising Consulting Services-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

1500.00

Transaction ID : PAYD265

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

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

**Kerri Condley**

Nature of Debt (Purpose):

Campaign Banner-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City

State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

35.74

Transaction ID : PAYD450

Amount Incurred This Period

0.00

Payment This Period

35.74

Outstanding Balance at Close of This Period

0.00

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

1500.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

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

0.00



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

PAGE 41 OF 45

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

NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

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

**Kerri Condley**

Nature of Debt (Purpose):

Remit Envelopes, Food and Beverages-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

316.35

Transaction ID : PAYD546

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

316.35

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

**Kerri Condley**

Nature of Debt (Purpose):

Toner, Food and Beverages - To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

80.42

Transaction ID : PAYD755

Amount Incurred This Period

0.00

Payment This Period

80.42

Outstanding Balance at Close of This Period

0.00

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

**Kerri Condley**

Nature of Debt (Purpose):

Campaign Buttons - To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City

State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

70.30

Transaction ID : PAYD756

Amount Incurred This Period

0.00

Payment This Period

70.30

Outstanding Balance at Close of This Period

0.00

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

316.35

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

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

0.00

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

PAGE 42 OF 45

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

NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

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

**Kerri Condley**

Nature of Debt (Purpose):

Event Tickets and Dues - To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

370.00

Transaction ID : PAYD757

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

370.00

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

**Kerri Condley**

Nature of Debt (Purpose):

Lodging and Tolls - To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

161.64

Transaction ID : PAYD758

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

161.64

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

**Kerri Condley**

Nature of Debt (Purpose):

Fuel and Tolls - To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City

State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD859

Amount Incurred This Period

59.87

Payment This Period

0.00

Outstanding Balance at Close of This Period

59.87

1) **SUBTOTALS** This Period This Page (optional) ..... ►

591.51

2) **TOTALS** This Period (last page this line number only) ..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ►

0.00

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

0.00

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

PAGE 43 OF 45

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

NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

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

**Kerri Condley**

Nature of Debt (Purpose):

Toner, Food and Beverages - To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD860

Amount Incurred This Period

78.66

Payment This Period

0.00

Outstanding Balance at Close of This Period

78.66

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

**Kerri Condley**

Nature of Debt (Purpose):

Food, Beverages, and Decorations - To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD861

Amount Incurred This Period

161.71

Payment This Period

0.00

Outstanding Balance at Close of This Period

161.71

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

**Tim Condley**

Nature of Debt (Purpose):

Fundraising Consulting Services-To Be Reimbursed

Mailing Address 22877 Sweetbay Drive

City

State

Zip Code

Wildomar

CA

92595

Outstanding Balance Beginning This Period

2088.09

Transaction ID : PAYD89

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2088.09

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

2328.46

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

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

0.00

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

PAGE 44 OF 45

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

NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

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

**River City Business Services**

Nature of Debt (Purpose):

Bookkeeping, Postage, Copies and Software  
Fee

Mailing Address 5429 Madison Avenue

City State

Zip Code

Sacramento

CA

95841

Outstanding Balance Beginning This Period

623.09

Transaction ID : PAYD506

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

623.09

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

**River City Business Services**

Nature of Debt (Purpose):

Bookkeeping, Postage, Copies and Software  
Fee

Mailing Address 5429 Madison Avenue

City State

Zip Code

Sacramento

CA

95841

Outstanding Balance Beginning This Period

402.63

Transaction ID : PAYD655

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

402.63

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

**River City Business Services**

Nature of Debt (Purpose):

Bookkeeping, Postage, Copies and Software  
Fee

Mailing Address 5429 Madison Avenue

City

State

Zip Code

Sacramento

CA

95841

Outstanding Balance Beginning This Period

441.16

Transaction ID : PAYD759

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

441.16

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

1466.88

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

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

0.00

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

PAGE 45 OF 45

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

NAME OF COMMITTEE (In Full)

**Kerri Condley for Congress**

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

**River City Business Services**

Nature of Debt (Purpose):

Bookkeeping, Postage, Copies And Software  
Fee

Mailing Address 5429 Madison Avenue

City State

Zip Code

Sacramento

CA

95841

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD829

Amount Incurred This Period

386.71

Payment This Period

0.00

Outstanding Balance at Close of This Period

386.71

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 Period

Outstanding Balance at Close of This Period

C. 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 Period

Outstanding Balance at Close of This Period

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

386.71

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

12018.07

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

1145.00

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

13163.07