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# REPORT OF RECEIPTS

| FORM 3 AND DISBURSEMENTS For An Authorized Committee |  |                      | Office Use Only                   |                  |   |                                  |
|--|--|----------------------|-----------------------------------|------------------|---|----------------------------------|
| NAME OF COMMITTEE (in                                | TYPE OR PRIN   | IT ▼                 | Example: If typin over the lines. | g, type          | 12FE4M5   |                                  |
| ADDRESS (number an                                   | PO BOX 412   | S<br>                |                                   |                  |   |                                  |
| Check if dif<br>than previous<br>reported. (A        | usly   BRADDOCK  | HEIGHTS              |                                   |                  | MD 21   | 714                              |
| 2. FEC IDENTIFIC                                     | CATION NUMBER ▼  | 3. IS THIS REPORT    | × NEW                             |                  | STATE AMENDEI                                     | ZIP CODE STATE ▼ DISTRICT  MD 06 |
| (a) Quarterly Re April 15 July 15 Octobe X January   | PORT (Choose One) eports: 6 Quarterly Report (Q1) Quarterly Report (Q2) r 15 Quarterly Report (Q3) r 31 Year-End Report (YE) | Election             | OST-Election Rep<br>General (30G  | 12C)             | General (120) Special (125) Y Y Y Y  Runoff (30R) | in the State of                  |
| 5. Covering Period                                   | 10 / 01  | / Y Y Y Y Y Y Y 2015 | through                           | M M M 12         | / D D /   | Y Y Y Y Y 2015                   |
| I certify that I have e                              | examined this Report and to  | •                    | knowledge and i                   | belief it is tru | ue, correct and c                                 | complete.                        |
| Signature of Treasure                                |  |                      | [Electronically 1                 |                  | ate 02  | 01 2016                          |
| NOTE: Submission of Office Use Only                  | false, erroneous, or incomp  | lete information m   | ay subject the per                | son signing t    | his Report to the                                 | FEC FORM 3 (Revised 02/2003)     |

### **SUMMARY PAGE**

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

## KATHY AFZALI FOR CONGRESS

10 12 31 2015 01 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 0.00 0.00 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 0.00 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 16112.68 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 15700.00 Schedule C and/or Schedule D).....

#### 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 PAGE 3 / 7 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

# KATHY AFZALI FOR CONGRESS

10 01 2015 12 31 2015 Report Covering the Period: From: To:

|     | I. RECEIPTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|-----|--|-------------------------------|------------------------------------|
| 11. | CONTRIBUTIONS (other than loans) FROM:   |                               |                                    |
|     | (a) Individuals/Persons Other Than   |                               |                                    |
|     | Political Committees (i) Itemized (use Schedule A)                                       | 0.00                          | 0.00                               |
|     | (ii) Unitemized  | 0.00                          | 0.00                               |
|     | (iii) TOTAL of contributions from individuals  | 0.00                          | 0.00                               |
|     | (b) Political Party Committees   | 0.00                          | 0.00                               |
|     | (c) Other Political Committees (such as PACs)  | 0.00                          | 0.00                               |
|     | (d) The Candidate  | 0.00                          | 0.00                               |
|     | (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))                             | 0.00                          | 0.00                               |
| 2.  | TRANSFERS FROM OTHER AUTHORIZED COMMITTEES   | 0.00                          | 0.00                               |
| 12  | LOANS:   | 9 9 9                         | 9 9 9                              |
| ١٥. | (a) Made or Guaranteed by the Candidate  | 0.00                          | 0.00                               |
|     | (b) All Other Loans  | 0.00                          | 0.00                               |
|     | (c) TOTAL LOANS (add Lines 13(a) and (b))  | 0.00                          | 0.00                               |
| 4.  | OFFSETS TO OPERATING   |                               |                                    |
|     | EXPENDITURES (Refunds, Rebates, etc.)  | 0.00                          | 0.00                               |
| 5.  | OTHER RECEIPTS (Dividends, Interest, etc.)   | 0.00                          | 0.00                               |
| 6.  | TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) | 0.00                          | 0.00                               |

# **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

ırsements

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|  | II. DISBURSEMENTS   | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|---|-------------------------------|------------------------------------|
| 17.  | OPERATING EXPENDITURES  | 0.00                          | 0.00                               |
| 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                               |
|  | <ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul> |                               |                                    |
|  | (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)                            | 0.00                          | 0.00                               |
|  | III. CASH SU  | MMARY                         |                                    |
| 23.  | 3. CASH ON HAND AT BEGINNING OF REPORTING PERIOD  |                               |                                    |
| 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) |   |                               | 0.00                               |
| 25.  | SUBTOTAL (add Line 23 and Line 24)  |                               | 16112.68                           |
| 26.  | TOTAL DISBURSEMENTS THIS PERIOD (from   | m Line 22)                    | 0.00                               |
| 27.  | 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD  (subtract Line 26 from Line 25)          |                               |                                    |

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

**PAGE** 

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| X | 13a |
|---|-----|
|   | 13b |

(check only one) Detailed Summary Page Transaction ID: SC/10.4102 NAME OF COMMITTEE (In Full) KATHY AFZALI FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: [PERSONAL FUNDS] Primary Kathryn Louise Afzali General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 412 State ZIP Code City MD 21769 **Braddock Heights** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 01 <sup>M</sup> <sup>D</sup>30 Ž012 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00

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

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

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

**PAGE** 

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**X** 13a

(check only one) Detailed Summary Page 13b Transaction ID: SC/10.4101 NAME OF COMMITTEE (In Full) KATHY AFZALI FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: [PERSONAL FUNDS] Primary Kathryn Louise Afzali General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 412 State ZIP Code City MD 21769 **Braddock Heights** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 03<sup>M</sup> Ž012 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 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**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

**PAGE** 

| × | 13a |
|---|-----|
|   | 13b |

(check only one) Detailed Summary Page Transaction ID: SC/10.4100 NAME OF COMMITTEE (In Full) KATHY AFZALI FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: [PERSONAL FUNDS] Primary Kathryn Louise Afzali General Mailing Address Other (specify) ulletPO Box 412 State ZIP Code City MD 21769 **Braddock Heights** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 3700.00 0.00 3700.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 05<sup>M</sup> 09 Ž012 0.00 ňone % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 3700.00 TOTALS This Period (last page in this line only) ...... 15700.00

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