Image# 14961161315					PAGE 1 / 9
FEC FORM 3	AND DI	COFRE SBURSE Authorized Com	MENTS	Office	e Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRIN		xample: If typing, type ver the lines.	12FE4M5	
John Cullum for (Congress				
ADDRESS (number and st	reet)				
Check if differe than previously reported. (ACC)	Atwood			CA 92811	
2. FEC IDENTIFICAT	ION NUMBER V	CITY		STATE	ZIP CODE ▲ STATE ▼ DISTRICT
C C00516443		3. IS THIS REPORT	× NEW (N) OR	AMENDED (A)	CA 46
	rts: arterly Report (Q1)	(b) 12-Day PRE	E-Election Report for th Primary (12P) Convention (12C)	e: General (12G) Special (12S)	Runoff (12R)
	arterly Report (Q2) Quarterly Report (Q3)	Election on		/ Y Y Y Y Y 2014	in the CA State of
January 31	Year-End Report (YE)	(c) 30-Day PO	ST-Election Report for General (30G)	the: Runoff (30R)	Special (30S)
Termination	Report (TER)	Election on		/ Y Y Y Y	in the State of
5. Covering Period		/ Y Y Y Y 2014	through		y y y 2014
I certify that I have exam Type or Print Name of T		o the best of my k	nowledge and belief it	is true, correct and corr	nplete.
Signature of Treasurer	John Cullum		[Electronically Filed]	Date	D D / Y Y Y Y 19 / 2014
NOTE: Submission of fals	e, erroneous, or incompl	ete information may	subject the person sign	F	EC FORM 3
FE5AN018				(Revised 02/2003)

Image# 14961161315

05/20/2014 02 : 33

Γ	_	FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2/9
		or Type Committee Name n Cullum for Congress		
R	epor	t Covering the Period: From:	04 / D D / Y Y Y Y 01 / 2014 To:	M 05 / D D / Y Y Y Y 14 / 2014
			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))	50.00	2850.00
	(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))	50.00	2850.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	913.89	6365.40
	(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))	913.89	6365.40
8.		sh on Hand at Close of porting Period (from Line 27)	71.37	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	4801.00	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

Image# 14961161316

		DETAILED SUMMARY PAGE of Receipts	PAGE 3/9
	rm 3 (Revised 12/2003)		FAGE 37 9
	m for Congress		
Report Covering	g the Period: From:	04 / D D / Y Y Y Y 01 / 2014 To:	M M / D D / Y Y Y Y Y 05 14 2014
I	. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTI	ONS (other than loans) FROM:		
(a) Individua	als/Persons Other Than		
	Committees	0.00	2600.00
(i) Itemi	zed (use Schedule A)	7 7 7	
()	emized	50.00	250.00
. ,	AL of contributions	50.00	2850.00
		0.00	0.00
	Party Committees		
(such as	PACs)	0.00	0.00
(d) The Can	didate	0.00	0.00
()		, , ,	, ,
	an loans) es 11(a)(iii), (b), (c), and (d))	50.00	2850.00
		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
12. TRANSFERS AUTHORIZED	COMMITTEES	0.00	0.00
13. LOANS:			
	Guaranteed by the		
Candida	te	700.00	3801.00
(b) All Other	r Loans	0.00	0.00
(c) TOTAL L		700.00	3801.00
	es 13(a) and (b))		
14. OFFSETS TC EXPENDITUE			
	bates, etc.)	0.00	0.00
15. OTHER RECI	FIPTS		
	nterest, etc.)	0.00	0.01
16. TOTAL RECI	EIPTS (add Lines		
(Carry Total t	(c), 14, and 15) o Line 24, page 4)	750.00	6651.01

Image# 14961161317

FEC Form 3 (Revised 02/2003) **COLUMN A** COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 913.89 6365.40 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 913.89 6365.40 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY** 235.26 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD 750.00

TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

25. SUBTOTAL (add Line 23 and Line 24)

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

(subtract Line 26 from Line 25).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

24

Image# 14961161318

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4/9

985.26

913.89

71.37

			FOR LINE NUMBER: PAGE 5 OF 9
SCHEDULE A (FEC Form 3)		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the	11a 11b 11c 11d
		Detailed Summary Page	$12 \times 13a \qquad 13b \qquad 14 \qquad 15$
			person for the purpose of soliciting contributions
or for commercial purposes, other than using	the name and a	address of any political committ	ee to solicit contributions from such committee.
John Cullum for Congress			
Full Name (Last, First, Middle Initial)			
A. John Cullum			Date of Receipt
Mailing Address P.O. Box 192			05 01 2014
City	State	Zip Code	
Atwood	CA	92811	Transaction ID : SA13A.4261
FEC ID number of contributing			Amount of Each Receipt this Period
federal political committee.	Сна	CA46123	Amount of Each necept this renou
Name of Employer	Occupation	1	700.00
SoCalGas Company	Strategy Ma	anager / Accountant	Loan by Candidate
Receipt For: 2014	Election C	ycle-to-Date	
Primary General		3801.00	1
Other (specify)		, , ,	1
Full Name (Last, First, Middle Initial)			
В			Date of Receipt
Mailing Address			M M / D D / Y Y Y Y
City	State	Zip Code	
Ony	Oldic		
FEC ID number of contributing			-
federal political committee.	С		Amount of Each Receipt this Period
Name of Employer	Occupatior	1	
	oooupuiloi		
Receipt For:	Election C	ycle-to-Date	
Primary General			1
Other (specify)		, ,	1
Full Name (Last, First, Middle Initial)			
C			Date of Receipt
C. Mailing Address			M M / D D / Y Y Y Y
City	State	Zip Code	
ony	Oluio		
FEC ID number of contributing			-
federal political committee.	С		Amount of Each Receipt this Period
Name of Employer	Occupatior		_
		1	
Receipt For:	Election C	ycle-to-Date	-
Primary General			1
Other (specify)		, ,	1
SUBTOTAL of Possints This Page (antiancil)			700.00
SUBTOTAL of Receipts This Page (optional).			
TOTAL This Period (last page this line number	er only)		700.00

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: (check only one) PAGE 6 OF 9 X 17 18 19a 19b 20a 20b 20c 21
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) John Cullum for Congress			
A.	Full Name (Last, First, Middle Initial) John Cullum			Date of Disbursement
	Mailing Address P.O. Box 192			05 01 2014
	City State Atwood CA	Zip Code 92811		Amount of Each Disbursement this Period 753.63
	Purpose of Disbursement Supplies / Web Hosting / Mileage		Category	Transaction ID : SB17.4264
	John Cullum for Congress		Туре	·
	Office Sought: X House Disbursement For Senate President Other (s State: CA District: 46	General		
в.	Full Name (Last, First, Middle Initial)			Date of Disbursement
	Mailing Address			M M / D D / Y Y Y Y
	City State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement		· · ·	
	Candidate Name		Category, Type	
	Office Sought: House Disbursement For Senate President Other (s	General		
	State: District: Full Name (Last, First, Middle Initial)			
C.				Date of Disbursement
	Mailing Address			
	City State Zi	p Code		Amount of Each Disbursement this Period
	Purpose of Disbursement			
	Candidate Name		Category, Type	
	Office Sought: House Disbursement For Senate President Other (s State: District:	General	-	
s	UBTOTAL of Disbursements This Page (optional)			753.63
	OTAL This Period (last page this line number only)			753.63

age# 14961161321							
HEDULE C (FEC ANS	Form 3)			Use separate schedu for each category of Detailed Summary P	the	PAGE 7 OF FOR LINE NUMBER: (check only one)	_
ME OF COMMITTEE (In Fi				Trans	action I	D : SC/10.4136	
LOAN SOURCE Full Nar John Cullum	ne (Last, First, Mid	ddle Initial)		[PERSONAL FUNDS]		ction: 2012 Primary General	
Mailing Address P.O. Box 192						Other (specify) ▼	
City		State	ZIP Cod	le			
Atwood		CA	92811				
Original Amount of Loan		Cumulative F	Payment To I	Date Ba	alance C	Dutstanding at Close of This	Peri
, ,	2250.00			1250.00		1000.00	0
TERMS Date Incur	red		Date Due	Interest Ra	ate	Secured:	
M03 ^M / D09 /	Ý Ž01Ž Ý	M M / D		a la	00	% (apr)	X
List All Endorsers or Gu		o Loan Sourc	e				
1. Full Name (Last, First,	Middle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7		
2. Full Name (Last, First,	Middle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7		
3. Full Name (Last, First,	Middle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7		
4. Full Name (Last, First,	Middle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7		
JBTOTALS This Period Th						1000.00	0
arry outstanding balance of	only to LINE 3, Sci	nedule D, for t	his line. If n	o Schedule D, carry fo	orward 1	to appropriate line of Sumr	- n

ANS ME OF COMMITTED Thn Cullum for				Use separate schedul for each category of t	
hn Cullum for LOAN SOURCE F John Cullum Mailing Address P.O. Box 192 City				Detailed Summary Pa	
John Cullum Mailing Address P.O. Box 192 City	0			Transa	ction ID : SC/10.4240
P.O. Box 192 City	ull Name (Last, First, Mid	ddle Initial)		[PERSONAL FUNDS]	Election: 2014 Primary General
-					Other (specify) ▼
Atwood		State	ZIP Code	e	<u> </u>
		CA	92811		
Original Amount o	f Loan	Cumulative P	ayment To D	Date Bal	ance Outstanding at Close of This Peri
, .	3101.00			0.00	3101.00
TERMS	e Incurred		Date Due	Interest Rat	e Secured:
M 03 ^M / 07		M M / D	_	31/2014 0.0	
	or Guarantors (if any) t	o Loan Sourc			
1. Full Name (Las	t, First, Middle Initial)			Name of Employer	
Mailing Address	3			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	-y
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:	-y
4. Full Name (Last,	First, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
	iod This Page (optional). last page in this line only				3101.00

ANS for Def Ite OF COMMITTEE (In Full) hn Cullum for Congress	If Employer tion
Image: Second	Transaction ID : SC/10.4261 Election: 2014 Primary General Other (specify) Balance Outstanding at Close of This Period 0.00 Interest Rate Secured: 0.00 % (apr) Yes No of Employer tion
John Cullum Mailing Address P.O. Box 192 City State ZIP Code Atwood CA 92811 Original Amount of Loan Cumulative Payment To Date Image: Comparison of Loan Date Due Image: Comparison of Comparison of Guarantors (if any) to Loan Source Name In Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code Mailing Address Occup City State ZIP Code City State ZIP Code Amound Guarantors Outstate State ZIP Code Amound Guarantors Outstate State ZIP Code Amound Guarantors State ZIP Code Outstate Outstate	Primary General Other (specify) ▼ Balance Outstanding at Close of This Period 0.00 700.00 Interest Rate Secured: 0.00 % (apr) Yes No of Employer tion
John Cullum Mailing Address P.O. Box 192 City State ZIP Code Atwood CA 92811 Original Amount of Loan Cumulative Payment To Date Image: Comparison of Loan Date Due Image: Comparison of Comparison of Guarantors (if any) to Loan Source Name In Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code Mailing Address Occup City State ZIP Code City State ZIP Code Amound Guarantors Outstate State ZIP Code Amound Guarantors Outstate State ZIP Code Amound Guarantors State ZIP Code Outstate Outstate	Primary General Other (specify) ▼ Balance Outstanding at Close of This Period 0.00 Interest Rate V 0.00 % (apr) Yes No reed ding:
P.O. Box 192 City State ZIP Code CA 92811 Original Amount of Loan Cumulative Payment To Date TERMS Date Incurred Date Due Mo5 ^M / O1 ^D / Y 2014 Y M M / D D / Y12/31/201 List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code Occup Mailing Address Occup City State ZIP Code Occup Amour City State ZIP Code Occup Amour City State ZIP Code Occup Amour City State ZIP Code Occup	Other (specify) ▼ Balance Outstanding at Close of This Period 0.00 700.00 Interest Rate Secured: 0.00 % (apr) Yes No of Employer 1 tion 1 eed 1 ding: 1
Attwood CA 92811 Original Amount of Loan Cumulative Payment To Date 700.00 Image: Comparison of	0.00 700.00 Interest Rate Secured: 0.00 % (apr) Yes No of Employer tion
Original Amount of Loan Cumulative Payment To Date 700.00 700.00 TERMS Date Incurred Mos ^M 01 ^D Y 2014 Y 01 ^D Y 2014 Y 01 ^D Y 2014 Name Name Mailing Address Occup Mailing Address Occup Amour Guaral Outsta 04 3. Full Name (Last, First, Middle Initial) Name	0.00 700.00 Interest Rate Secured: 0.00 % (apr) Yes No of Employer tion
Tooloo Date Incurred Date Due M05 O1 ✓ 2014 M ✓ 0 ✓ 12/31/201 List All Endorsers or Guarantors (if any) to Loan Source Interview Name 1. Full Name (Last, First, Middle Initial) Name Occup Mailing Address Occup Amour City State ZIP Code Outsta 2. Full Name (Last, First, Middle Initial) Name Name Mailing Address Occup Outsta 2. Full Name (Last, First, Middle Initial) Name Mailing Address Occup Amour Outsta 3. Full Name (Last, First, Middle Initial) Name	0.00 700.00 Interest Rate Secured: 0.00 % (apr) Yes No of Employer tion
Date Incurred Date Due M05 / 01 / Y 2014 M M / D / Y12/31/201 List All Endorsers or Guarantors (if any) to Loan Source I. Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code Outsta 2. Full Name (Last, First, Middle Initial) Name Mamour Mailing Address Occup Amour City State ZIP Code Outsta 2. Full Name (Last, First, Middle Initial) Name Amour Mailing Address Occup Amour Guaran Outsta Occup Amour State ZIP Code Outsta 3. Full Name (Last, First, Middle Initial) Name Name	Interest Rate Secured: 0.00 % (apr) Yes No of Employer tion reed ding:
Date Incurred Date Due M05 / 01 / 2014 M M / D D / 12/31/201 List All Endorsers or Guarantors (if any) to Loan Source Name 1. Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code Mailing Address Occup Mailing Address Occup City State ZIP Code Mailing Address Occup Amour Guaran Mailing Address Occup Amour Mailing Address Mailing Address Occup Amour Guaran Outsta Name State ZIP Code Mailing Address Occup Mailing Address Name Amour Name Amour Name Amour Name Mailing Address <	v 0.00 % (apr) Yes No
M05 / D01 / Ž014 M M / D D / Ž1/31/201 List All Endorsers or Guarantors (if any) to Loan Source Name 1. Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code 2. Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code Mailing Address Occup Mailing Address Name Mailing Address Name State ZIP Code Amour Guaran Outsta Name Amour Name Mailing Address Occup Amour Outsta State ZIP Code Name Outsta Name Name	v 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code 2. Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code Mailing Address Occup City State ZIP Code Mailing Address Occup Mailing Address Occup Mailing Address Occup Mailing Address Occup State ZIP Code Amour Guaran Outsta Occup Mailing Address Occup Amour Guaran Outsta Occup Amour Mailing All Name (Last, First, Middle Initial) Name S. Full Name (Last, First, Middle Initial) Name	If Employer tion
1. Full Name (Last, First, Middle Initial) Name Mailing Address Occup Amour Amour City State ZIP Code 2. Full Name (Last, First, Middle Initial) Name Mailing Address Occup Mailing Address Occup City State ZIP Code Mailing Address Occup City State ZIP Code Amour Quaral Outsta Mailing Address Occup Amour City State ZIP Code Amour Quaral Outsta Amour Name Name State ZIP Code Quaral Outsta Name Name State ZIP Code Quaral Outsta Name Name State ZIP Code Quaral Outsta Name Name	tion reed ding:
Mailing Address Occup City State ZIP Code City State ZIP Code 2. Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code Mailing Address Occup City State ZIP Code Amour Guaran Occup Amour Occup Amour State ZIP Code Occup Amour State ZIP Code Name Name Name State ZIP Code Outsta Name Name Name State ZIP Code Outsta State ZIP Code Outsta State ZIP Code Outsta	tion reed ding:
City State ZIP Code Amour City State ZIP Code Outsta 2. Full Name (Last, First, Middle Initial) Name Name Mailing Address Occup Amour City State ZIP Code Amour Guaran Occup City State ZIP Code 3. Full Name (Last, First, Middle Initial) Name	eed ding:
City State ZIP Code Guaral Outsta 2. Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code Amour Guaral Outsta City State ZIP Code 3. Full Name (Last, First, Middle Initial) Name	eed ding:
Outsta Outsta 2. Full Name (Last, First, Middle Initial) Name Mailing Address Occup City State ZIP Code Guaran Outsta Outsta 3. Full Name (Last, First, Middle Initial) Name	ding:
Mailing Address Occup City State ZIP Code 3. Full Name (Last, First, Middle Initial) Name	
Amound City State ZIP Code Guarand Outsta 3. Full Name (Last, First, Middle Initial)	f Employer
City State ZIP Code Guaran Outsta 3. Full Name (Last, First, Middle Initial) Name	tion
Outsta 3. Full Name (Last, First, Middle Initial)	
3. Full Name (Last, First, Middle Initial) Name	
Mailing Address Occup	f Employer
	tion
Amour	
City State ZIP Code Guaran Outsta	
4. Full Name (Last, First, Middle Initial) Name	f Employer
Mailing Address Occup	tion
City State ZIP Code Guara Outsta	reed
BTOTALS This Period This Page (optional)	
TALS 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.