

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED FEC MAIL CENTER 2016 Oct 20 PM 12:08

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

RAB FOR CONGRESS COMMITTEE

ADDRESS (number and street)

117015 VENTURA BLVD

CAMPAIN SECTION

ENCINO CA 91316

Check if different than previously reported. (ACC)

CITY

STATE

ZIP CODE

FEC IDENTIFICATION NUMBER

C00581058

3. IS THIS REPORT

Checked box for NEW

NEW (N)

OR

Unchecked box for AMENDED

AMENDED (A)

STATE DISTRICT

CA 30

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

Unchecked box

April 15 Quarterly Report (Q1)

Unchecked box

July 15 Quarterly Report (Q2)

Unchecked box

October 15 Quarterly Report (Q3)

Checked box

January 31 Year-End Report (YE)

Unchecked box

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Unchecked box

Primary (12P)

Unchecked box

General (12G)

Unchecked box

Runoff (12R)

Unchecked box

Convention (12C)

Unchecked box

Special (12S)

Election on

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

in the State of

CA

(c) 30-Day POST-Election Report for the:

Unchecked box

General (30G)

Unchecked box

Runoff (30R)

Unchecked box

Special (30S)

Election on

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

in the State of

CA

5. Covering Period

10/01/2015

through

12/31/2015

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 AEJAZ (RAJI) RAB

Signature of Treasurer

Handwritten signature

Date

01/21/2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type: Committee Name

RAB FOR CONGRESS COMMITTEE

Report Covering the Period: From:

10 ' 01 ' 2015

To:

12 ' 31 ' 2015

20150310 10:00 AM

**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))

3,500.00

3,500.00

(b) Total Contribution Refunds
(from Line 20(d))

3,500.00

3,500.00

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

0.00

0.00

Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

36,306.85

36,306.85

(b) Total Offsets to Operating
Expenditures (from Line 14)

3,500.00

3,500.00

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

0.00

0.00

8. Cash on Hand at Close of
Reporting Period (from Line 27)

47,141.66

9. Debts and Obligations Owed **TO**
the Committee (Itemize all on
Schedule C and/or Schedule D)

0.00

10. Debts and Obligations Owed **BY**
the Committee (Itemize all on
Schedule C and/or Schedule D)

0.00

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

RAB FOR CONGRESS COMMITTEE

Report Covering the Period: From:

10 ' 01 ' 2015

To:

12 ' 31 ' 2015

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).....

31,501.00

31,501.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions from individuals ▶

31,501.00

31,501.00

(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

(e) TOTAL CONTRIBUTIONS

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

31,501.00

31,501.00

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

0.00

0.00

13. LOANS:

(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

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

3,500.00

3,500.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines

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

35,001.00

35,001.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	36,306.85	36,306.85
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.....	3,500.00	3,500.00
(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)).....	3,500.00	3,500.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	39,806.85	39,806.85

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	9,520.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	35,001.00
25. SUBTOTAL (add Line 23 and Line 24).....	44,521.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39,806.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4,714.16

2025 RELEASE UNDER E.O. 14176

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

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

FOR LINE NUMBER: PAGE 2 OF 6
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
RAG FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
A. SINGH, TARSEM

Mailing Address
15927 RAYEN ST

City NORTH HILLS State CA Zip Code 91343

FEC ID number of contributing federal political committee. C

Name of Employer _____ Occupation SELF EMPLOYED

Receipt For: Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
MM ' DD ' YYYY
10 ' 03 ' 2015

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. KAUR, RAJVINDER

Mailing Address
22004 CHATSWORTH ST.

City CHATSWORTH State CA Zip Code 91311

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
MM ' DD ' YYYY
10 ' 27 ' 2015

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. RANDHAWA, AMINDER

Mailing Address
16900 VENTURA BLVD

City ENCINO State CA Zip Code 91316

FEC ID number of contributing federal political committee. C

Name of Employer _____ Occupation SELF EMPLOYED

Receipt For: Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
MM ' DD ' YYYY
11 ' 17 ' 2015

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) 5500.00

TOTAL This Period (last page this line number only)

2015-11-10 10:00 AM

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

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

FOR LINE NUMBER: PAGE 3 OF 6
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
RAB FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
GREWAL, BALDEV

Mailing Address
21326 BLACKHAWK ST.

City **CHATS WORTH** State **CA** Zip Code **91311**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
11 ' 17 ' 2015

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
SINGH, RAVINDER

Mailing Address
14448 HARVEST MOON DR.

City **SYLMAR** State **CA** Zip Code **91342**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
12 ' 01 ' 2015

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
SINGH, AMARJOT

Mailing Address
245 LOWER CLIFF DR.

City **LAGUNA BEACH** State **CA** Zip Code **92651**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
12 ' 01 ' 2015

Amount of Each Receipt this Period
2700.00

SUBTOTAL of Receipts This Page (optional)..... **7900.00**

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

NON-PROFIT ORGANIZATION

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 6

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

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NAME OF COMMITTEE (In Full)

RAB FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. VIRANI, MOHAMMAD

Mailing Address

16530 VENTURA BLVD. NO. 306

City
ENCINO

State Zip Code
CA 91436

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation
SELF EMPLOYED

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

12 / 07 / 2015

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. SINGH, DIDAR

Mailing Address

1408 S 4th AVE

City
ARCADIA

State Zip Code
CA 91006

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation
SELF EMPLOYED

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

12 / 29 / 2015

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. AHMED, RUBINA

Mailing Address

22525 SHERMAN WAY UNIT 504

City
WEST HILLS

State Zip Code
CA 91307

FEC ID number of contributing federal political committee.

C

Name of Employer

IQRA ELEM. SCHOOL

Occupation
PRINCIPAL

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

12 / 31 / 2015

Amount of Each Receipt this Period

2500.00

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

7500.00

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

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NAME OF COMMITTEE (In Full)
RAB FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. USA EXPEDITION INC.		Date of Disbursement 1.0 / 02 / 2015
Mailing Address 17015 VENTURA BLVD.		Amount of Each Disbursement this Period 450.00
City ENCINO	State CA	
Zip Code 91316		Category/ Type 0.0.6
Purpose of Disbursement CAMPAIGN STICKERS		
Candidate Name AJAZ (RAJ) RAB		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 30	

Full Name (Last, First, Middle Initial) B. USA EXPEDITION INC.		Date of Disbursement 1.0 / 02 / 2015
Mailing Address 17015 VENTURA BLVD.		Amount of Each Disbursement this Period 1125.00
City ENCINO	State CA	
Zip Code 91316		Category/ Type 0.0.6
Purpose of Disbursement CAMPAIGN FLYERS		
Candidate Name AJAZ (RAJ) RAB		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 30	

Full Name (Last, First, Middle Initial) C. USA EXPEDITION INC.		Date of Disbursement 1.0 / 02 / 2015
Mailing Address 17015 VENTURA BLVD.		Amount of Each Disbursement this Period 450.00
City ENCINO	State CA	
Zip Code 91316		Category/ Type 0.0.6
Purpose of Disbursement CAMPAIGN STICKERS		
Candidate Name AJAZ (RAJ) RAB		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 30	

SUBTOTAL of Disbursements This Page (optional).....	2025.00
TOTAL This Period (last page this line number only).....	

2010-01-28 PM 00:00

**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 3 OF 8

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

RAB FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A. USA EXPEDITION INC

Mailing Address

1705 VENTURA BLD

City
ENCINO

State
CA

Zip Code
91316

Purpose of Disbursement

RENT FOR OCT. 2015

Candidate Name

AEJAZ (RAJI) RAB

0.01

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: CA

District: 30

Date of Disbursement

10 ' 02 ' 2015

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. USA EXPEDITION INC

Mailing Address

17015 VENTURA BLD

City
ENCINO

State
CA

Zip Code
91316

Purpose of Disbursement

CAMPAIGN POSTERS CALENDAR 2016

Candidate Name

AEJAZ (RAJI) RAB

0.06

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: CA

District: 30

Date of Disbursement

10 ' 09 ' 2015

Amount of Each Disbursement this Period

2700.00

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK

Mailing Address

6460 PLATT AVE.

City
WEST HILLS

State
CA

Zip Code
91307

Purpose of Disbursement

BANK RECURRING TRANSFER

Candidate Name

AEJAZ (RAJI) RAB

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: CA

District: 30

Date of Disbursement

10 ' 05 ' 2015

Amount of Each Disbursement this Period

25.00

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

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

4225.00

**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 5 OF 8	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
RAB FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. WELLS FARGO BANK		Date of Disbursement 11 / 16 / 2015
Mailing Address 6460 PLATT AVE		Amount of Each Disbursement this Period 25.00
City WEST HILLS	State CA	
Zip Code 91307		Category/ Type
Purpose of Disbursement BANK RECURRING TRANSFER		
Candidate Name AEJAZ (RAJI) RAB		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 30	

Full Name (Last, First, Middle Initial) USA EXPEDITION INC		Date of Disbursement 11 / 18 / 2015
Mailing Address 17015 VENTURA BLVD		Amount of Each Disbursement this Period 1,500.00
City ENCINO	State CA	
Zip Code 91316		Category/ Type 0.01
Purpose of Disbursement RENT FOR NOV. 2015		
Candidate Name AEJAZ (RAJI) RAB		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 30	

Full Name (Last, First, Middle Initial) C. USA EXPEDITION INC		Date of Disbursement 11 / 18 / 2015
Mailing Address 17015 VENTURA BLVD		Amount of Each Disbursement this Period 270.00
City ENCINO	State CA	
Zip Code 91316		Category/ Type 0.06
Purpose of Disbursement CAMPAIGN POSTERS CALENDAR 2016		
Candidate Name AEJAZ (RAJI) RAB		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 30	

SUBTOTAL of Disbursements This Page (optional).....	4225.00
TOTAL This Period (last page this line number only).....	

2015-01-01 - 2015-12-31

**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 6 OF 8			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
RAB FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. KINGS DELIGHT DELI		11 / 23 / 2015
Mailing Address 21925 SATCOY ST		Amount of Each Disbursement this Period 6.85
City CANOGA PARK	State CA	
Zip Code 91304		Category/ Type 0.01
Purpose of Disbursement OFFICE SUPPLIES		
Candidate Name AEJAZ (RAJ) RAB		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 30	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USA EXPEDITION INC.		12 / 02 / 2015
Mailing Address 17015 VENTURA BLD.		Amount of Each Disbursement this Period 3,600.00
City ENCINO	State CA	
Zip Code 91316		Category/ Type 0.06
Purpose of Disbursement CAMPAIGN POSTERS CALENDAR 2016		
Candidate Name AEJAZ (RAJ) RAB		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 30	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. USA EXPEDITION INC		12 / 02 / 2015
Mailing Address 17015 VENTURA BLD		Amount of Each Disbursement this Period 1,500.00
City ENCINO	State CA	
Zip Code 91316		Category/ Type 0.01
Purpose of Disbursement RENT FOR DEC. 2015		
Candidate Name AEJAZ (RAJ) RAB		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 30	

SUBTOTAL of Disbursements This Page (optional).....	5,106.85
TOTAL This Period (last page this line number only).....	

2015-01-08 10:00:23 AM

**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 7 OF 8			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
RAB FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. USA EXPEDITION INC		12 / 14 / 2015
Mailing Address 17015 VENTURA BVD		Amount of Each Disbursement this Period 4500.0
City ENCINO	State CA Zip Code 91316	
Purpose of Disbursement CAMPAIGN STICKERS		Category/ Type 0.06
Candidate Name AEJAZ (RAJI) RAB		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 30		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USA EXPEDITION INC		12 / 14 / 2015
Mailing Address 17015 VENTURA BVD		Amount of Each Disbursement this Period 4500.00
City ENCINO	State CA Zip Code 91316	
Purpose of Disbursement CAMPAIGN POSTERS CALENDAR 2016		Category/ Type 0.06
Candidate Name AEJAZ (RAJI) RAB		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 30		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. WELLS FARGO BANK		12 / 15 / 2015
Mailing Address 6460 PLATT AVE		Amount of Each Disbursement this Period 25.00
City WEST HILLS	State CA Zip Code 91307	
Purpose of Disbursement BANK RECURRING TRANSFER		Category/ Type
Candidate Name AEJAZ (RAJI) RAB		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 30		

SUBTOTAL of Disbursements This Page (optional).....	49750.0
TOTAL This Period (last page this line number only).....	

2015-01-28 00:04:21

**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 8 OF 8

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

RAB FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

A.

USA EXPEDITION INC

Mailing Address

17015 VENTURA BLVD

City
ENCINO

State
CA

Zip Code
91316

Purpose of Disbursement

CAMPAIGN POSTERS CALENDAR 2016

0.0.6

Candidate Name

AEJAZ (RAJI) RAB

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: CA

District: 30

Date of Disbursement

12 / 24 / 2015

Amount of Each Disbursement this Period

4,500.00

2015-01-01 - 2015-12-31

B.

USA EXPEDITION INC.

Mailing Address

17015 VENTURA BLVD.

City
ENCINO

State
CA

Zip Code
91316

Purpose of Disbursement

CAMPAIGN POSTERS CALENDAR 2016

0.0.6

Candidate Name

AEJAZ (RAJI) RAB

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: CA

District: 30

Date of Disbursement

12 / 30 / 2015

Amount of Each Disbursement this Period

1,800.00

C.

USA EXPEDITION INC

Mailing Address

17015 VENTURA BLVD

City
ENCINO

State
CA

Zip Code
91316

Purpose of Disbursement

CAMPAIGN POSTERS CALENDAR 2016

0.0.6

Candidate Name

AEJAZ (RAJI) RAB

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: CA

District: 30

Date of Disbursement

12 / 30 / 2015

Amount of Each Disbursement this Period

3,600.00

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

9,900.00

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

39,806.85

SCHEDULE C (FEC Form 3)

LOANS NO LOANS

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

PAGE OF

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

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

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

/ /
 / /
 / /
 % (apr)
 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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

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.

2019-01-28 AM 0004247M

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS *NO DEBTS & OBLIGATIONS*

(Use separate schedule(s) for each numbered line)

PAGE OF

FOR LINE NUMBER: (check only one)

9
 10

Excluding Loans

NAME OF COMMITTEE (In Full)

A. 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

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)	<input type="text"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

2010-01-20 09:00 AM BOBOSTANIN

PRESS FIRMLY TO SEAL

PRESS FIRMLY TO SEAL



U.S. POSTAGE
PAID
ENCINO, CA
91316
JAN 27, 18
AMOUNT
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FROM: (PLEASE PRINT) PHONE: _____

*Patricia Rab, XAS For Congress
17615 Ventura BL
ENCINO CA 91316*

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USPS[®] Corporate Acct. No. Federal Agency Acct. No. or Postal Service[™] Acct. No.

DELIVERY OPTIONS (Customer Use Only)
 SIGNATURE REQUIRED Note: The mailer must check the Signature Required box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt Service. If the box is not checked, the Postal Service will leave the item to the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.
Delivery Options
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WASHINGTON, DC 20463*

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Date Accepted (MMDDYY) 1-27	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM	Return Receipt Fee \$	Live Animal Transportation Fee \$	
Time Accepted 12:48 PM	10:30 AM Delivery Fee \$	Total Postage & Fees \$ 22.95		
Weight 6 lbs.	Sunday/Holiday Premium Fee \$			
Rate Priority Rate	Acceptance Employee Initials <i>[Signature]</i>			
DELIVERY (POSTAL SERVICE USE ONLY)	Employee Signature Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature Time <input type="checkbox"/> AM <input type="checkbox"/> PM		
Delivery Attempt (MMDDYY) Time				
Delivery Attempt (MMDDYY) Time				

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NECESSARY
IF MAILED
IN THE
UNITED STATES

