

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

Abel Maldonado For Congress

ADDRESS (number and street) ▼

PO Box 5325

Check if different than previously reported. (ACC)

Santa Maria

CA

93456-5325

2. **FEC IDENTIFICATION NUMBER** ▼

C C00493379

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

CA

24

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 / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Kelly Lawler

Signature of Treasurer Kelly Lawler

[Electronically Filed]

Date

/ /

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								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Abel Maldonado For Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2013 To: M M / D D / Y Y Y Y 03 / 31 / 2013

	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))....	0	14225
(b) Total Contribution Refunds (from Line 20(d))	4000	5000
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-4000	9225
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	28168.97	141060.9
(b) Total Offsets to Operating Expenditures (from Line 14).....	4931.67	5268.45
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	23237.3	135792.45
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6152.45	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	11500	

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)

Write or Type Committee Name

Abel Maldonado For Congress

Report Covering the Period: From: / / To: / /

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).....	0	12750
(ii) Unitemized.....	0	475
(iii) TOTAL of contributions from individuals ▶	0	13225
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	1000
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0	14225
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	4931.67	5268.45
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	1826.16
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	4931.67	21319.61

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	28168.97	141060.9
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	4000	5000
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	4000	5000
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	32168.97	146060.9

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	33389.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4931.67
25. SUBTOTAL (add Line 23 and Line 24).....	38321.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	32168.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6152.45

**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 15
	<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	

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)
Abel Maldonado For Congress

A. Full Name (Last, First, Middle Initial)
Santa Barbara County Clerk

Mailing Address 511 Lakeside Parkway

City Santa Maria State CA Zip Code 93455-1341

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) General 2012

Election Cycle-to-Date
 _____ 4931.67

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2013

Transaction ID : A-O40118

Amount of Each Receipt this Period
 _____ 4931.67

Refund on Candidate Fees

B. 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

C. 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).....

_____ 4931.67

_____ 4931.67

**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 15			
	<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)
Abel Maldonado For Congress

Full Name (Last, First, Middle Initial) A. Kitchen for Exploring Foods, LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address 1434 W Colorado Boulevard		Amount of Each Disbursement this Period 4357.74
City Pasadena State CA Zip Code 91105-1414	Purpose of Disbursement Fundraising: Fundraiser Catering	Transaction ID : B-E-39909
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	
State: District:		

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2013
Mailing Address PO Box 34744		Amount of Each Disbursement this Period 304.59
City Seattle State WA Zip Code 98124-1744	Purpose of Disbursement Utilities Final Bill	Transaction ID : B-E-40111
Candidate Name	Category/Type 001	
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. Capitol Consulting & PR		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address PO Box 22347		Amount of Each Disbursement this Period 1500
City Carmel State CA Zip Code 93922-0347	Purpose of Disbursement Administrative Consulting	Transaction ID : B-E-40109
Candidate Name	Category/Type 001	
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).....	6162.33
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 7 OF 15			
	<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)
Abel Maldonado For Congress

Full Name (Last, First, Middle Initial) A. The KAL Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2013
Mailing Address PO Box 984		Amount of Each Disbursement this Period 750 Transaction ID : B-E-40090
City Willows State CA Zip Code 95988-0984	Purpose of Disbursement Bookkeeping Candidate Name Category/Type 001	
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. Raul Resendez Consulting		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address 7046 Callaghan Road		Amount of Each Disbursement this Period 6000 Transaction ID : B-E-40110
City San Antonio State TX Zip Code 78229-4611	Purpose of Disbursement Administrative Consulting Candidate Name Category/Type 001	
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. Wells Fargo Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2013
Mailing Address 3431 California Street		Amount of Each Disbursement this Period 30.98 Transaction ID : B-E-40105
City San Francisco State CA Zip Code 94118-1836	Purpose of Disbursement Bank Fees Candidate Name Category/Type 001	
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).....	6780.98
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 8 OF 15			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Abel Maldonado For Congress

Full Name (Last, First, Middle Initial) A. Raul Resendez Consulting			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2013
Mailing Address 7046 Callaghan Road			Amount of Each Disbursement this Period 734.84
City San Antonio	State TX	Zip Code 78229-4611	
Purpose of Disbursement Office Utilites and Travel		Candidate Name	Transaction ID : B-E-40082
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)		Original vendors exceeding reporting threshold itemized as memo transactions.	
State:	District:		

Full Name (Last, First, Middle Initial) B. Southern California Edison			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2013
Mailing Address PO Box 600			Amount of Each Disbursement this Period 150.07
City Rosemead	State CA	Zip Code 91770-0600	
Purpose of Disbursement Utilities		Candidate Name	Transaction ID : B-S-4819
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)		[MEMO ITEM] Subitemization of Raul Resendez Consulting(01/09/13)	
State:	District:		

Full Name (Last, First, Middle Initial) c. Scott Howell & Company			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2013
Mailing Address 3900 Willow Street Suite 200			Amount of Each Disbursement this Period 8500
City Dallas	State TX	Zip Code 75226-1248	
Purpose of Disbursement Advertising: Television Production		Candidate Name	Transaction ID : B-E-40112
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012			
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	9234.84
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 9 OF 15	
	<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)
Abel Maldonado For Congress

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank		Date of Disbursement MM / DD / YYYY 02 / 11 / 2013
Mailing Address 3431 California Street		Amount of Each Disbursement this Period 23.01 Transaction ID : B-E-40117
City San Francisco State CA Zip Code 94118-1836	Purpose of Disbursement Bank Fees Candidate Name Category/Type 001	
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. CompleteCampaigns.com a division of Aristotle International, Inc		Date of Disbursement MM / DD / YYYY 03 / 21 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 425 Transaction ID : B-E-40113
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Administrative/Salary/Overhead: Software Candidate Name Category/Type 001	
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. Wells Fargo Bank		Date of Disbursement MM / DD / YYYY 03 / 11 / 2013
Mailing Address 3431 California Street		Amount of Each Disbursement this Period 21.22 Transaction ID : B-E-40116
City San Francisco State CA Zip Code 94118-1836	Purpose of Disbursement Bank Fees Candidate Name Category/Type 001	
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).....	469.23
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 10 OF 15			
	<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)
Abel Maldonado For Congress

Full Name (Last, First, Middle Initial) A. CompleteCampaigns.com a division of Aristotle International, Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 459.53 Transaction ID : B-E-40083
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Administrative/Salary/Overhead: Software Candidate Name Category/Type 001	
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. CompleteCampaigns.com a division of Aristotle International, Inc		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 850 Transaction ID : B-E-40108
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Administrative/Salary/Overhead: Software Candidate Name Category/Type 001	
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. Harris Ranch		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2013
Mailing Address 24505 W Dorris Avenue		Amount of Each Disbursement this Period 1015.26 Transaction ID : B-E-40086
City Coalinga State CA Zip Code 93210-9667	Purpose of Disbursement Fundraising: Fundraising Catering Candidate Name Category/Type 003	
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).....	2324.79
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 11 OF 15	
	<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)
Abel Maldonado For Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2013
Mailing Address 20002 N 19th Avenue		Amount of Each Disbursement this Period 2543.67
City Phoenix	State AZ	
Zip Code 85027-4250	Purpose of Disbursement Credit Card Payment:See Memos	Transaction ID : B-E-40104
Candidate Name	001 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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. Santa Maria Inn		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2013
Mailing Address 801 S Broadway		Amount of Each Disbursement this Period 1500
City Santa Maria	State CA	
Zip Code 93454-6659	Purpose of Disbursement Rent	Transaction ID : B-S-4870
Candidate Name	001 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)	[MEMO ITEM] Subitemization of American Express(01/15/13)
State: District:		

Full Name (Last, First, Middle Initial) c. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2013
Mailing Address 1335 S Bradley Road		Amount of Each Disbursement this Period 537
City Santa Maria	State CA	
Zip Code 93454-8005	Purpose of Disbursement Thank You Cards/Postage	Transaction ID : B-S-4871
Candidate Name	001 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)	[MEMO ITEM] Subitemization of American Express(01/15/13)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2543.67
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 12 OF 15			
	<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)
Abel Maldonado For Congress

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2013
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 203.86
City Carol Stream	State IL	Zip Code 60197-6463
Purpose of Disbursement Telephone Service	Category/ Type 001	
Candidate Name	Transaction ID : B-S-4872	
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)	[MEMO ITEM] Subitemization of American Express(01/15/13)
State: District:		

Full Name (Last, First, Middle Initial) B. Courtyard		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2013
Mailing Address 17200 El Rancho Way		Amount of Each Disbursement this Period 277.1
City Salinas	State CA	Zip Code 93907
Purpose of Disbursement Event Catering	Category/ Type 001	
Candidate Name	Transaction ID : B-S-4873	
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)	[MEMO ITEM] Subitemization of American Express(01/15/13)
State: District:		

Full Name (Last, First, Middle Initial) c. Mark's Garden		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address 13838 Ventura Boulevard		Amount of Each Disbursement this Period 598.13
City Sherman Oaks	State CA	Zip Code 91423-3629
Purpose of Disbursement Fundraising: Fundraiser Decor	Category/ Type 003	
Candidate Name	Transaction ID : B-E-39910	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	598.13
TOTAL This Period (last page this line number only).....	28113.97

**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 13 OF 15	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Abel Maldonado For Congress

Full Name (Last, First, Middle Initial) A. John C. Harris		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2013
Mailing Address 23300 W Oakland Avenue		Amount of Each Disbursement this Period 1500 Transaction ID : B-E-40114
City Coalinga	State CA	
Zip Code 93210-9804	Purpose of Disbursement Contribution Refund: Contribution Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	State: District:	

Full Name (Last, First, Middle Initial) B. J & N Trucking and Lowbed Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013
Mailing Address 2647 Santa Barbara Drive		Amount of Each Disbursement this Period 2500 Transaction ID : B-E-40107
City Santa Maria	State CA	
Zip Code 93455-1793	Purpose of Disbursement Contribution Refund: Contribution Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	4000.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

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

Mailing Address 834 Abrego Street
Suite B

City State Zip Code
Monterey CA 93940-3104

Nature of Debt (Purpose):
Administrative/Salary/Overhead: Software

Outstanding Balance Beginning This Period **Transaction ID : SD10-DEBT40081**

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
Raul Resendez Consulting

Mailing Address 7046 Callaghan Road

City State Zip Code
San Antonio TX 78229-4611

Nature of Debt (Purpose):
Administrative/Salary/Overhead: Office Utilites and Travel

Outstanding Balance Beginning This Period **Transaction ID : SD10-DEBT40082**

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
Scott Howell & Company

Mailing Address 3900 Willow Street
Suite 200

City State Zip Code
Dallas TX 75226-1248

Nature of Debt (Purpose):
Advertising: Television Production

Outstanding Balance Beginning This Period **Transaction ID : SD10-DEBT40112**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="11500.00"/>
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"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Abel Maldonado For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Harris Ranch		Nature of Debt (Purpose): Fundraising: Fundraising Catering
Mailing Address 24505 W Dorris Avenue		
City State	Zip Code	
Coalinga CA	93210-9667	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT40086	
<input type="text" value="1015.26"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="1015.26"/>	<input type="text" value="0"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kitchen for Exploring Foods, LLC		Nature of Debt (Purpose): Fundraising: Fundraiser Catering
Mailing Address 1434 W Colorado Boulevard		
City State	Zip Code	
Pasadena CA	91105-1414	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT39909	
<input type="text" value="4357.74"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="4357.74"/>	<input type="text" value="0"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mark's Garden		Nature of Debt (Purpose): Fundraising: Fundraiser Decor
Mailing Address 13838 Ventura Boulevard		
City State	Zip Code	
Sherman Oaks CA	91423-3629	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT39910	
<input type="text" value="598.13"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="598.13"/>	<input type="text" value="0"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="11500.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="11500.00"/>