				•	en la ser a ser and a ser a
FEC FORM 3		T OF RE SBURSE	MENTS		RECEIVED
1. NAME OF COMMITTEE (in fu	TYPE OR PRIN		ample: If typing, type	familian familie	EC MAIL CENTER
LAMAR STERNAL	FORCONGRESS				·
ADDRESS (number and			<u> </u>		
Check if diffe than previous reported. (AC		<u>, , , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · · · ·		3157 <u>8607</u>
2. FEC IDENTIFICA	TION NUMBER V			STATE	ZIP CODE
C 00505529		3. IS THIS REPORT	(N) OR	AMENDE (A)	STATE ▼ DISTRICT
(a) Quarterly Rep	Quarterly Report (Q1)	(b) 12-Day PRE	-Election Report for th Primary (12P) Convention (12C)	ne: General (120	
October 1	luarterly Report (Q2) 15 Quarterly Report (Q3)	Election on			in the State of
	1 Year-End Report (YE) on Report (TER)	(c) 30-Day POS	General (30G)	Runoff (30R) Special (30S) in the State of
5. Covering Period	<u>04</u> ' <u>01°</u>	2012	through	6 ^m ' 30 [°] '	2012
I certify that I have exa Type or Print Name of	Treasurer Justin		nowledge and belief it		\ <u> - 0 - 0 </u> \ <u> - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - </u>
Signature of Treasurer		$^{\prime}N^{-}$		Date 08	
NOTE: Submission of fa	lse, erroneous, or incomp	lete information may	subject the person sign	ning this Report to the	penalties of 2 U.S.C. §437g.
Use Only					FEC FORM 3 (Revised 02/2003)

-

	- FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	Page 2
	rite or Type Committee Name AMAR STERNAD FOR CONGRE	ESS	
R	eport Covering the Period: From:	4 ^M ′ ^b 01° ′ <u>2012</u> Ť To:	06" [′] 30° [′] 2012 [′]
6.	Net Contributions (other than loans)	COLUMN A This Period	COLUMN B Election Cycle-to-Date
	(a) Total Contributions(other than loans) (from Line 11(e))	0.00	505.00
	(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))	<u>0.00</u>	505.00
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	10,526.45	10,526.65
	(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))	10,526.45	10,526.65
8.	Cash on Hand at Close of Reporting Period (from Line 27)	306.95	
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)	10,828.60	

For further information contact:

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

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

1

FE5AN018

.

LA M M

12030871

Γ		TAILED SUMMARY PAGE of Receipts	Page 3
W	FEC Form 3 (Revised 12/2003) rite or Type Committee Name		
L	AMAR STERNAD FOR CONGRES	S	
R	eport Covering the Period: From: 04	′ °01° ′ ≚2012 ⊤α	o: 06 ' 30 ' 2012 '
	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)	0.00	505.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	505.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
		0.00	0.00
	(e) TOTAL CONTRIBUTIONS	<u>and and and a standard and and and and and and and and and an</u>	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	505.00
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate	10,803.60	10,878.60
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	10,803.60	10,878.60
14.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
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)	10,803.60	11,383.60

12030871336

FE5AN018

DETAILED SUMMARY PAGE

	FEC Form 3 (Revised 02/2003)	of Disbursements	Page 4	
II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17.	OPERATING EXPENDITURES	10,526.45	11,026.65	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	
19.	LOAN REPAYMENTS:			
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	50.00	
		0.00	0.00	
	 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)) 	0.00	50.00	
0.	REFUNDS OF CONTRIBUTIONS TO:			
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committeea (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)	10,526.45	11,076.65	

III. CASH SUMMARY

23.	Cash on hand at beginning of reporting period	29.80
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	10,803.60
25.	SUBTOTAL (add Line 23 and Line 24)	10,833.40
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	10,526.45
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	306.95

FE5AN018

	· · · · · · · · · · · · · · · · · · ·								
SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 5 OF 13 (check only one)							
ITEMIZED RECEIPTS	for each category of the Detailed Summery Page	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$							
	Any information copied from such Reports and Statements may not be sold or used by any pe								
NAME OF COMMITTEE (In Full)									
LAMAR STERNAD FOR CO	ONGRESS								
Full Name (Last, First, Middle Initial) A. Sternad, Justin L.		Date of Receipt							
Mailing Address 19790 SW 101 Avenue	State Zip Code	05 (25 / 2012							
Cutler Bay	State Zip Code FL 33157-8607								
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period							
Name of Employer Wyndham Garden	Occupation Hotel Auditor	licenst mertinen fannske i 13 merten skin den stadste ser							
Receipt For: 2012	Election Cycle-to-Date								
Other (specify)	375.00								
Full Name (Last, First, Middle Initial) B. Sternad, Justin L.		Date of Receipt							
Mailing Address 19790 SW 101 Avenue	· · · · · · · · · · · · · · · · · · ·	06 / 07 / 2012							
Cutler Bay	State Zip Code FL 33157-8607								
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period							
Name of Employer Wyndham Garden	Occupation Hotel Auditor								
Reccipt For: 2012	Election Cycle-to-Date								
Other (specify)	5375.00								
Full Name (Last, First, Middle Initial) c. Sternad, Justin L.		Date of Receipt							
19790 SW 101 Avenue	· · · · · · · · · · · · · · · · · · ·	06 / 07 / 2012							
^{City} Cutler Bay	State Zip Code FL 33157-8607								
FEC ID number of contributing federal political committee.	CL	Amount of Each Receipt this Period							
Name of Employer Wyndham Garden	Occupation Hotel Auditor	5500.00							
Receipt For: 2012	Election Cycle-to-Date								
Yerimary General Other (specify)	10,875.00								
SUBTOTAL of Receipts This Page (optional)	ala _{man} a _{nin} ma _n y _a <u>n</u> y _a , aniny a, an <u>in</u> any	10,800.00							
TOTAL This Period (last page this line number									
· · ·		FEC Schedule A (Form 3) (Revised 02/2009)							
• · · ·									

.

.

6/			· · ·	FOR LINE NUMBER: PAGE 6 OF 13
	SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
				12 X 13a 13b 14 15
		person for the purpose of soliciting contributions to solicit contributions from such committee.		
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	NGRES	S	
Ľ	Full Name (Last, First, Middle (Naal)		- 	
A.	Sternad, Justin L.			Date of Receipt
	Mailing Address 19790 SW 101 Avenue		L M	04 / 12 / 2012
	Cutler Bay	State FL	^{Zip Code} 33157-8607	
	FEC ID number of contributing _ federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer	Occupation Hotel A	uditor	3.60
	Wyndham Garden Receipt For: 2012		/cie-to-Date	_
	X Primary General	1	10,878.60	
	Other (specify)	lancata and a		
	Full Name (Last, First, Middle Initial)			Date of Receipt
Β.	Mailing Address	· · · · · · · · · · · · · · · · · · ·	, <u></u> , <u>_</u>	
	City	State	Zip Code	
	FEC ID number of contributing			-
	federal political committee.			Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	Receipt For:	-	vcle-to-Date	
	Primary General Other (specify)		agenengerengeren janen operatoroaksijaan Anvenduristaan in alder der der der der der der der der der	
	Full Name (Last, First, Middle Initial)			
C.	Mailing Address			Date of Receipt
	_			
	City	State	Zip Code	
	FEC ID number of contributing		alan a faam faam faan iyon yoonad	-
	federal political committee.		-Come Come Come	Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	Receipt For:	Election C	vcle-to-Date	-
	Other (specify)		<mark>หมื่อสระสภัตรเกลมีหลาด</mark> โอกรอบใบรระเป็น และนี้เขาสะเส	
		Ennettenenflur :	a hanna har bhliann fermail dèan dheann lea dèil da ann	<u>1</u>
6	UBTOTAL of Receipts This Page (optional)	3.60		
	······································			10,803,60
T	OTAL This Period (last page this line number of	only)		- Landandan frankritin franklinder tillen

i

.

OF 13 PAGE FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED DISBURSEMENTS** X 17 18 19a 19b **Detailed Summary Page** 20a 20b 21 20c 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 eommittee to solicit centributions from such committee. NAME OF COMMITTEE (In Full) LAMAR STERNAD FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A TD Bank 2012 04 30 Mailing Address 19199 S. Dixie Highway Zip Code 33157 City State Amount of Each Disbursement this Period Cutler Bay FL Purpose of Disbursement 8.00 **Maintenance** Fee 001 Candidate Name Category/ Justin L. Sternad Type Office Sought: House Disbursement For: 2012 Senate Primary General Other (specify) President District: 26 State: FL Full Name (Last, First, Middle Initial) Date of Disbursement в. TD Bank Mailing Address ່ ທີ່ 5 19199 S. Dixie Highway City State Zip Code Amount of Each Disbursement this Period 33157 FL Cutler Bay Purpose of Disbursement 8.00 Maintenance Fee 001 Candidate Name Category/ Justin L. Sternad Type Office Sought: X House Disbursement For: 2012 Senate Primary General Other (specify) President State: FL District: 26 Full Name (Last, First, Middle Initial) Date of Disbursement c. TD Bank 06 **່**າງ Mailing Address 19199 S. Dixie Highway 2012 State Zip Code 33157 City Amount of Each Disbursement this Period FL Cutler Bay Purpose of Disbursement 8.00 Maintenance Fee 001 Candidate Name Category/ Justin L. Sternad Type Disbursement For: 2012 Office Sought: House Senate Primary General President Other (specify) State: FL District: 26 24.00 SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).....

O

PAGE 8 OF 13 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED DISBURSEMENTS** X 17 18 19a 19b **Detailed Summary Page** 20b 21 20a 200 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 solioit contributions from such committee. NAME OF COMMITTEE (In Full) LAMAR STERNAD FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. USPS 2012 12 በ4 Mailing Address 1300 Washington Avenue City State Zip Code 33119 Amount of Each Disbursement this Period Miami Beach FL <u>3.6</u>0 Purpose of Disbursement 001 Postage Candidate Name Category/ Justin L. Sternad Type Disbursement For: 2012 Office Sought: House X Primary Senate General President Other (specify) State: FL District: 26 Full Name (Last, First, Middle Initial) Date of Disbursement B. Boost Mobile Mailing Address 06 D 9060 Irvine Center Drive City State Zip Code Amount of Each Disbursement this Period CA 92618 Irvine 58.85 Purpose of Disbursement Telephone 001 Candidate Name Category/ Justin L. Sternad Type Disbursement For: 2012 X House Office Sought: Primary Senate General President Other (specify) State: FL District:26 Full Name (Last, First, Middle Initial) Date of Disbursement c. Florida Department of State 06 ່ 05 Mailing Address n 500 S. Bronough St. Room 316, R.A. Gray Building State FL City Zip Code Amount of Each Disbursement this Period 32399 Tallahassee Purpose of Disbursement 10,440.00 Qualifying Fee 001 Candidate Name Category/ Justin L. Sternad Туре Disbursement For: 2012 Office Sought: House General Primary Senate Other (specify) President State: FL District: 26 10,502.45 SUBTOTAL of Disbursements This Page (optional)..... 10.526.45 TOTAL This Period (last page this line number only).....

SCHEDULE C (FEC Form 3)		Use separate sch	edule(s)	PAGE 9 FOR LINE NUMBER:	OF 13
LOANS		for each category Detailed Summary		(check only one)	X 13a 13b
NAME OF COMMITTEE (In Full) LAMAR STERNAD FOR CON	GRESS				
LOAN SOURCE Full Name (Last, First, Mi STERNAD, JUSTIN L.	idāle Initial) [PERSO]	NAL FUNDS]	Ele	ction: 2012 Primary General	
Mailing Address 19790 SW 101 Avenue	•			Other (specify) ¥	
^{City} Cutler Bay	State ZIP Coc FL 3315	^{de} 7-8607	<u></u>		
Original Amount of Loan	Cumulative Payment To		Balance (Outstanding at Close of	f This Period
TERMS Date Incurred 04 ' 12 ' 2012			Rate		red: /es <u>No</u>
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to Loan Source	Name of Employer			
Mailing Address		Occupation		······	- <u></u>
City State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	angana yan		
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			<u></u>
City State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			<u> </u>
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:		مريم مريم مي معرف مي مريم مي معرف مي مي معرف مي مي معرف مي مي معرف مي	- <u>G</u> #]
SUBTOTALS This Period This Page (optional)					3.60
TOTALS This Period (last page in this line on	ly)	····· Þ			4)
Carry outstanding balance only to LINE 3, Sc	hedule D, for this line. If r	o Schedule D, carry	forward	to appropriate line of	Summary.

FE5AN018

·			PAGE 10 O	F 13
SCHEDULE C (FEC	Form 3)		Use separate schedule(s) FOR LINE NUMBER:	13a 13b
NAME OF COMMITTEE (In Ful LAMAR STERNAD I	•	GRESS		
LOAN SOURCE Fail Nam STERNAD, JUST		Idle Initial) [PERSC	X Primary General	
Mailing Address 19790 SW 101 Av	venue	• 	Other (specify) ▼	
City Cutler Bay		State ZIP C FL 331	^{50de} 57-8607	
Original Amount of Loan	300.00	Cumulative Payment T	alardomikarda handa handa kanalaraharaharaharaharah	is Period
TERMS Date Incurre	2 <u>012</u>	Date Dut M M / ON / Ľ	e Interest Rate Secured:	X No
List All Endorsers or Gua 1. Full Name (Last, First, I		o Loan Source	Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Cutstanding:	
2. Full Name (Last, First, N	fiddle Initial)	· · · _, · · · · · · · · · · · · · · · ·	Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:]
3. Full Name (Last, First, N	iddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, N	fiddle Initial)	· · · · · · · · · · · · · · · · · · ·	Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This TOTALS This Period (last pag	e in this line only	/)). <u>Ŏ</u> O
Carry outstanding balance or	BY TO LINE 3, SC	neaule D, for this line. I	If no Schedule D, carry forward to appropriate line of Sun	nmary.

٠

.

FEC Schedule C (Form 3) (Revised 02/2003)

.

FE5AN018

:

SCHEDULE C (FEC Form 3) LOANS	Use separate schedule(s) for each category of the Detailed Summary Page
NAME OF COMMITTEE (In Full)	
LEAN SOURCE Fall Name (Last, First, Middle Initial) [PERSON STERNAD, JUSTIN L.	JAL FUNDS] Election: 2012 X Primary General
Mailing Address 19790 SW 101 Avenue	Other (specify) ▼
CityStateZIP CoorCutler BayFL3315	^{de} 7-8607
Original Amount of Loan Cumulative Payment To 5,000.00	Date Balance Outstanding at Close of This Period
TERMS Date Incurred Date Due 1 07 1 2012 1 0 1 <	Interest Rate Secured: MĂŇĎ 0.00 % (apr) Ves No
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	▶ 5,000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3. Schedule D. for this line. If a	o Schedule D. carry forward to appropriate line of Summary

FE5AN018

FEC Schedule C (Form 3) (Revised 02/2003)

SCHEDULE C (FEC Fo .OANS	rm 3)		Use separate schedule(s) for each category of the Detailed Summary Page
NAME OF COMMITTEE (IN FUII)	FOR CC	NGRESS	
LOAN SOURCE Full Name (L STERNAD, JUSTIN	ast, First, Mic		ONAL FUNDS] Election: 2012 X Primary General
Mailing Address 19790 SW 101 Aver	nue		Other (specify) 🔻
^{City} Cutler Bay		State ZIP C FL 331	^{Code} 157-8607
Original Amount of Loan	500.0Q	Cumulative Payment	To Date Balance Outstanding at Close of This Peri 0.00 5,500.00
TERMS Date Incurred 06 ' 08 ' 20 List All Endorsers or Guaran	12) 12)	andread Landamad in	ue Interest Rate Secured: ĎĚMĂŇĎ 0.00 % (apr) Ves N
1. Full Name (Last, First, Mid			Name of Employer
Mailing Address	<u> </u>		Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Mido	lle Initial)		Name of Employer
Mailing Address			Occupation Amount
City	State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Mido	lle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Mido	lle Initial)	<u></u>	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Arnount Guaranteed Outstanding:
SUBTOTALS This Period This Pa		······································	יייין איז
Carry outstanding balance only i			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 Detailed Summary Page	PAGE 13 OF 13 FOR LINE NUMBER: (check only one) X 13a 13b
NAME OF COMMITTEE (In Full)	ESS		-
LOAN SOURCE Full Name (Last, First, Mi STERNAD, JUSTIN L.		NAL LOAN]	ction: 2012 Primary
Mailing Address 19790 SW 101 Avenue			General Other (specify) ▼
City Cutler Bay	State ZIP Code FL 33157	• 7-8607	· · · ·
Original Amount of Loan	Cumulative Payment To I	Date Balance	Outstanding at Close of This Period
TERMS Date Incurred 03 [™] 30° 2012 [™]	Date Due M M / ON / DE	Interest Rate	Secured:) % (apr) Yes No
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address	· [Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation Amount	
City State	ZIP Code	Guaranteed Outstanding:	alaren 2-arek Donalaren deran deran der
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address	_	Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	<u>1 </u>
SUBTOTALS This Period This Page (optional). TOTALS This Period (last page in this line onl	y)		<u>25.00</u> 10,828.60
Carry outstanding balance only to LINE 3, Sc	hedule D, for this line. If n	o Schedule D, carry forward	to appropriate line of Summary.

FE5AN018

ţ

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation [™] or Signature Confirmation [™] Label	
USPS Express Mail	Postmarked 8/2/12
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Date of Receipt Date of Receipt Received from House Records & Registration Office	
Received from Senate Public Records Offic	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
R	8/3/12
PREPARER (3/2005)	DATE PREPARED
	· · · · ·