

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

16 FEB 2 9:57 AM

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Rocky Chavez for U.S. Senate

ADDRESS (number and street) 32302 Camino Capistrano #214 San Juan Capistrano CA 92675

2. FEC IDENTIFICATION NUMBER C00573832 3. IS THIS REPORT NEW (N) OR AMENDED (A) CA

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) [X] 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 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 Barrett Garcia

Signature of Treasurer [Signature] Date 01 / 29 / 2016

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 FEC FORM 3 (Revised 02/2003)

201602030200048398

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

Rocky Chavez for U.S. Senate

Report Covering the Period: From:

MM / DD / YYYY  
10 / 01 / 2015

To:

MM / DD / YYYY  
12 / 31 / 2015

	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))...	11,457.50	105,036.84
(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))...	11,457.50	105,036.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	23,261.36	107,431.06
(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))...	23,261.36	107,431.06
8. Cash on Hand at Close of Reporting Period (from Line 27) ..	369.02	
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) ..	42,889.37	

For further information contact:

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

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

201602030200048399

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Rocky Chavez for U.S. Senate

Report Covering the Period: From:

MM / DD / YYYY  
10 / 01 / 2015

To:

MM / DD / YYYY  
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) ...	9,150.00	91,468.34
(ii) Unitemized .....	2,307.50	10,168.50
(iii) TOTAL of contributions from individuals ..	11,457.50	101,636.84
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ...	0.00	3,400.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11,457.50	105,036.84
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...	2,500.00	2,500.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	2,500.00	2,500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)...		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....		
	144.24	263.24
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	14,101.74	107,800.08

201602030200048400

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES ..	23,261.36	107,431.06
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate ..	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..	0.00	0.00
(b) Political Party Committees ..	0.00	0.00
(c) Other Political Committees (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) ►	23,261.36	107,431.06

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD ...	9,528.64
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) ..	14,101.74
25. SUBTOTAL (add Line 23 and Line 24) ..	23,630.38
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) ..	23,261.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) ..	369.02

201602030200048401

**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 1	OF 8
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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)  
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) Carol Reed		Date of Receipt MM / DD / YYYY 10 / 01 / 2015
Mailing Address 253 N Westwind City State Zip Code El Cajon, CA 92020		Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C	Occupation Retired	
Name of Employer n/a	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) Ryan Redmond		Date of Receipt MM / DD / YYYY 10 / 09 / 2015
Mailing Address 5390 Los Robles Dr. City State Zip Code Carlsbad, CA 92008		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Occupation President	
Name of Employer Redline Surgical	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) Dennis Kenneally		Date of Receipt MM / DD / YYYY 10 / 26 / 2015
Mailing Address 6470 Brynwood Way City State Zip Code San Diego, CA 92120		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Occupation Retired	
Name of Employer	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00
Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	1,200.00
TOTAL This Period (last page this line number only).....	

201602030200048402

**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 2 OF 8
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) Michael Gubash		Date of Receipt MM / DD / YYYY 11 / 06 / 2015	
Mailing Address 7455 Rush River Dr #38 City State Zip Code Sacramento, CA 95831		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired	Election Cycle-to-Date 230.00	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Del Debra		Date of Receipt MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 8786 Augusta City State Zip Code Dublin, CA 94568		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Del Conte Landscaping Administration	Election Cycle-to-Date 250.00	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Tom Del Conte		Date of Receipt MM / DD / YYYY 11 / 12 / 2015	
Mailing Address 8786 Augusta City State Zip Code Dublin, CA 94568		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Del Conte Landscaping Business Owner	Election Cycle-to-Date 500.00	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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**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 3 OF 8	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) A. Ron Rubin		Date of Receipt MM / DD / YYYY 11 / 16 / 2015	
Mailing Address 375 S. Rio Vista City State Zip Code Brawley, CA 92227		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Name of Employer Rubin Seeds, LLC	
Occupation Farmer		Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 250.00			

Full Name (Last, First, Middle Initial) B. Greg Swett		Date of Receipt MM / DD / YYYY 11 / 16 / 2015	
Mailing Address 12331 Airlinie Hwy City State Zip Code Pacines, CA 95043		Amount of Each Receipt this Period 1,000.00	
FEC ID number of contributing federal political committee. C		Name of Employer Swett Orchards	
Occupation Owner		Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 1,000.00			

Full Name (Last, First, Middle Initial) C. Andy Vasquez		Date of Receipt MM / DD / YYYY 11 / 16 / 2015	
Mailing Address 1923 Pyramid Creek City State Zip Code Marysville, CA 92901		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Name of Employer Yuba County	
Occupation County Supervisor		Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 200.00			

SUBTOTAL of Receipts This Page (optional).....	1,450.00
TOTAL This Period (last page this line number only).....	

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**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 4 OF 8	
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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**NAME OF COMMITTEE (In Full)**  
Rocky Chavez for U.S. Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Jon Vessey		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 16 / 2015	
Mailing Address PO Box 28 City State Zip Code Holtville, CA 92250		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Vessey & Company		Occupation Business Owner	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Patricia Starritt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 19 / 2015	
Mailing Address 505 Torrano Court City State Zip Code Holli, CA 95023		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer NCJUSD		Occupation Teacher	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 200.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Lawrence Cox		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 20 / 2015	
Mailing Address PO Box 301 City State Zip Code Brawley, CA 92227		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Lawrence Cox Ranches		Occupation Business Owner	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1,200.00
TOTAL This Period (last page this line number only).....	500.00

201602030200048405



**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 8
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) Howard Elmore		Date of Receipt MM / DD / YYYY 11 / 20 / 2015
Mailing Address 290 West I Street City State Zip Code Brawley, CA 92227		Amount of Each Receipt this Period 1,000.00
FEC ID number of contributing federal political committee. C	Occupation Farmer	
Name of Employer Vail Ranches LLC	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 1,000.00
Election Cycle-to-Date 1,000.00		

Full Name (Last, First, Middle Initial) Charles Hosken		Date of Receipt MM / DD / YYYY 11 / 20 / 2015
Mailing Address 1996 Chambers Lane City State Zip Code Holtville, CA 92250		Amount of Each Receipt this Period 1,000.00
FEC ID number of contributing federal political committee. C	Occupation COO	
Name of Employer SunPeak Solar	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 1,000.00
Election Cycle-to-Date 1,000.00		

Full Name (Last, First, Middle Initial) Steven McDowell		Date of Receipt MM / DD / YYYY 11 / 20 / 2015
Mailing Address 1605 Forest Way City State Zip Code Del Mar, CA 92014		Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C	Occupation Retired	
Name of Employer	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 200.00
Election Cycle-to-Date 200.00		

SUBTOTAL of Receipts This Page (optional).....	2,200.00
TOTAL This Period (last page this line number only).....	

201602030200048406

**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 6	OF 8
<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)  
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) Steve Scaroni		Date of Receipt MM / DD / YYYY 11 / 20 / 2015	
Mailing Address PO Box 1550 City State Zip Code Heber, CA 92249		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Scaroni Family of Companies		Occupation Founder	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Paul Gaspar		Date of Receipt MM / DD / YYYY 11 / 24 / 2015	
Mailing Address 748 Lynwood Dr City State Zip Code Encinitas, CA 92024		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Gaspar PT		Occupation Physical Therapist	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Robert Noble		Date of Receipt MM / DD / YYYY 12 / 10 / 2015	
Mailing Address 4932 Wildwood Dr City State Zip Code Oceanside, CA 92057		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 900.00	
Name of Employer		Occupation Retired	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 900.00	

SUBTOTAL of Receipts This Page (optional).....	1,200.00
TOTAL This Period (last page this line number only).....	

201602030200048407

**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 7 OF 8	
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) A. Gregg Short		Date of Receipt MM / DD / YYYY 12 / 15 / 2015
Mailing Address 6054 Corte Del Cedro City State Zip Code Carlsbad, CA 92011		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	Occupation CEO	
Name of Employer Waste Wise	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 1,250.00
Election Cycle-to-Date 1,250.00		

Full Name (Last, First, Middle Initial) B. Temujin Chavez		Date of Receipt MM / DD / YYYY 12 / 16 / 2015
Mailing Address 3304 Stockton Drive City State Zip Code Florence, SC 29501		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	Occupation Physician	
Name of Employer Carolinas Hospital System	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 250.00
Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Julianne Nygaard		Date of Receipt MM / DD / YYYY 12 / 16 / 2015
Mailing Address 3405 Spanish Way City State Zip Code Carlsbad, CA 92008		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	Occupation Retired	
Name of Employer N/A	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 250.00
Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

201602030200048408

**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 8	OF 8
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) A. Benno Dobbe		Date of Receipt 12 / 21 / 2015
Mailing Address 1066 S. Pekin Rd. City State Zip Code Woodland, WA 98674		
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Lolland America Flower Connections Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Owner	
Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Michael Gubash		Date of Receipt 12 / 28 / 2015
Mailing Address 7455 Rush River Dr #38 City State Zip Code Sacramento, CA 95831		
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer	Occupation Retired	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date 230.00		

Full Name (Last, First, Middle Initial) C. Barton Lane		Date of Receipt 12 / 29 / 2015
Mailing Address 648 Distel Dr City State Zip Code Los Altos, CA 94022		
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer	Occupation Retired	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date 200.00		

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	9,150.00

201602030200048409

**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 1 OF 1
<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) Rocky Chavez		Date of Receipt MM / DD / YYYY 12 / 18 / 2015
Mailing Address 4985 Calle Arquero City State Zip Code Oceanside, CA 92057		Amount of Each Receipt this Period 2,500.00
FEC ID number of contributing federal political committee. C		
Name of Employer State of California	Occupation Assemblyman	Amount of Each Receipt this Period 2,500.00
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2,500.00	

Full Name (Last, First, Middle Initial)		Date of Receipt MM / DD / YYYY
Mailing Address City State Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial)		Date of Receipt MM / DD / YYYY
Mailing Address City State Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	2,500.00
TOTAL This Period (last page this line number only).....	2,500.00

201602030200048410

**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 1 OF 16	
	<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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Anedot, Inc.		Date of Disbursement MM / DD / YYYY 10 / 01 / 2015	
Mailing Address 5555 Hilton Ave, Ste 106		Amount of Each Disbursement this Period 109.43	
City Baton Rouge, LA 70808	State	Zip Code	Category/ Type 001
Purpose of Disbursement Merchant Fees			
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:			

B. Full Name (Last, First, Middle Initial) Zach Lierly		Date of Disbursement MM / DD / YYYY 10 / 01 / 2015	
Mailing Address 1117 22nd Street, #3		Amount of Each Disbursement this Period 266.66	
City Sacramento, CA 95816	State	Zip Code	Category/ Type 002
Purpose of Disbursement Car rental expenses			
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:			

C. Full Name (Last, First, Middle Initial) Praetorian Public Relations		Date of Disbursement MM / DD / YYYY 10 / 01 / 2015	
Mailing Address 32 Chestnut Place		Amount of Each Disbursement this Period 2,000.00	
City Danville, CA 94506	State	Zip Code	Category/ Type 001
Purpose of Disbursement Campaign Consulting			
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).....	2,376.09
TOTAL This Period (last page this line number only).....	

201602030200048411

**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 2 OF 16	
	<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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Praetorian Public Relations		Date of Disbursement MM / DD / YYYY 10 / 01 / 2015
Mailing Address 32 Chestnut Place		Amount of Each Disbursement this Period 372.96
City Danville, CA 94506	State Zip Code	
Purpose of Disbursement Travel Expense Reimbursements	Category/Type 002	
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:		

B. Full Name (Last, First, Middle Initial) Anedot, Inc.		Date of Disbursement MM / DD / YYYY 10 / 05 / 2015
Mailing Address 5555 Hilton Ave, Ste 106		Amount of Each Disbursement this Period 10.74
City Baton Rouge, LA 70808	State Zip Code	
Purpose of Disbursement Merchant Fees	Category/Type 001	
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:		

C. Full Name (Last, First, Middle Initial) Crystal Catering		Date of Disbursement MM / DD / YYYY 10 / 05 / 2015
Mailing Address 824 Malibu Point Way		Amount of Each Disbursement this Period 278.44
City Oceanside, CA 92058	State Zip Code	
Purpose of Disbursement Food & Beverages for Fundraiser	Category/Type 003	
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).....	662.14
TOTAL This Period (last page this line number only).....	

201602030200048412

**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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Barrett Garcia		Date of Disbursement MM / DD / YYYY 10 / 05 / 2015
Mailing Address 32302 Camino Capistrano #214		Amount of Each Disbursement this Period 1,550.00
City San Juan Capistran, CA	State CA	
Zip Code 92675	Purpose of Disbursement Accounting services	Category/ Type 001
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:	

B. Full Name (Last, First, Middle Initial) Michael Hadland		Date of Disbursement MM / DD / YYYY 10 / 05 / 2015
Mailing Address 2772 Escala Circle		Amount of Each Disbursement this Period 488.07
City San Diego, CA	State CA	
Zip Code 92018	Purpose of Disbursement Reimbursement for Convention hotel	Category/ Type 002
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:	

C. Full Name (Last, First, Middle Initial) Anaheim Marriott		Date of Disbursement MM / DD / YYYY 10 / 05 / 2015
Mailing Address 700 West Convention Way		Amount of Each Disbursement this Period MEMO 488.07
City Anaheim, CA	State CA	
Zip Code 92802	Purpose of Disbursement Convention Hotel	Category/ Type 002
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).....	2,038.07
TOTAL This Period (last page this line number only).....	

201602030200048413



**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 4 OF 16	
	<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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Marissa Pickard		Date of Disbursement MM / DD / YYYY 10 / 05 / 2015
Mailing Address 2107 27th Street #4		Amount of Each Disbursement this Period 250.00
City Sacramento, CA	State CA	
Zip Code 95818	Purpose of Disbursement Event Invites	Category/ Type 001
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:	

B. Full Name (Last, First, Middle Initial) Sprint		Date of Disbursement MM / DD / YYYY 10 / 05 / 2015
Mailing Address PO Box 4191		Amount of Each Disbursement this Period 66.14
City Carol Stream, IL	State IL	
Zip Code 60197	Purpose of Disbursement Phone Services	Category/ Type 001
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:	

C. Full Name (Last, First, Middle Initial) Anedot, Inc.		Date of Disbursement MM / DD / YYYY 10 / 09 / 2015
Mailing Address 5555 Hilton Ave, Ste 106		Amount of Each Disbursement this Period 25.66
City Baton Rouge, LA	State LA	
Zip Code 70808	Purpose of Disbursement Merchant Fees	Category/ Type 001
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).....	341.80
TOTAL This Period (last page this line number only).....	

201602030200048414

**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 16	
	<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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Marriott City Center Oakland		Date of Disbursement MM / DD / YYYY 10 / 13 / 2015
Mailing Address 1001 Broadway		Amount of Each Disbursement this Period 144.24
City Oakland, CA	State CA	
Zip Code 94607	Purpose of Disbursement Hotel for Oakland Trip	Category/ Type 002
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:	

B. Full Name (Last, First, Middle Initial) Anedot, Inc.		Date of Disbursement MM / DD / YYYY 10 / 14 / 2015
Mailing Address 5555 Hilton Ave, Ste 106		Amount of Each Disbursement this Period 3.27
City Baton Rouge, LA	State LA	
Zip Code 70808	Purpose of Disbursement Merchant Fees	Category/ Type 001
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:	

C. Full Name (Last, First, Middle Initial) Praetorian Public Relations		Date of Disbursement MM / DD / YYYY 10 / 14 / 2015
Mailing Address 32 Chestnut Place		Amount of Each Disbursement this Period 2,000.00
City Danville, CA	State CA	
Zip Code 94506	Purpose of Disbursement Campaign Consulting	Category/ Type 001
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) .....	2,147.51
TOTAL This Period (last page this line number only) .....	

201602030200048415

**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 16	
	<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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Compupay		Date of Disbursement MM / DD / YYYY 10 / 23 / 2015
Mailing Address 2301 Campus Drive Suite 175		Amount of Each Disbursement this Period 46.00
City State Zip Code Irvine, CA 92612		
Purpose of Disbursement Payroll Processing Fees	Category/Type 001	
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:		

B. Full Name (Last, First, Middle Initial) Marriott City Center Oakland		Date of Disbursement MM / DD / YYYY 10 / 23 / 2015
Mailing Address 1001 Broadway		Amount of Each Disbursement this Period 144.24
City State Zip Code Oakland, CA 94607		
Purpose of Disbursement Hotel for Oakland Trip	Category/Type 002	
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:		

C. Full Name (Last, First, Middle Initial) Bieber Communications		Date of Disbursement MM / DD / YYYY 10 / 27 / 2015
Mailing Address 3609 W MacArthur Blvd #812		Amount of Each Disbursement this Period 237.60
City State Zip Code Santa Ana, CA 92704		
Purpose of Disbursement Mailings	Category/Type 006	
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).....	427.84
TOTAL This Period (last page this line number only).....	

201602030200048416

**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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

**A.**

Full Name (Last, First, Middle Initial)  
Praetorian Public Relations

Date of Disbursement  
MM / DD / YYYY  
10 / 30 / 2015

Mailing Address  
32 Chestnut Place

City State Zip Code  
Danville, CA 94506

Purpose of Disbursement  
Campaign Consulting

Candidate Name

Category/Type  
001

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
2,000.00

**B.**

Full Name (Last, First, Middle Initial)  
Praetorian Public Relations

Date of Disbursement  
MM / DD / YYYY  
10 / 30 / 2015

Mailing Address  
32 Chestnut Place

City State Zip Code  
Danville, CA 94506

Purpose of Disbursement  
On-line Advertising Expense

Candidate Name

Category/Type  
004

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
750.07

**C.**

Full Name (Last, First, Middle Initial)  
Facebook Inc.

Date of Disbursement  
MM / DD / YYYY  
10 / 30 / 2015

Mailing Address  
1601 Willow Road

City State Zip Code  
Menlo Park, CA 94025

Purpose of Disbursement  
Facebook Ads

Candidate Name

Category/Type  
001

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
MEMO 750.07

SUBTOTAL of Disbursements This Page (optional) ..... 2,750.07

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

201602030200048417

**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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Sprint

Date of Disbursement  
MM / DD / YYYY  
11 / 10 / 2015

Mailing Address  
PO Box 4191

City State Zip Code  
Carol Stream, IL 60197

Purpose of Disbursement  
Phone Services

Candidate Name

Category/Type  
001

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
66.32

**B.** Full Name (Last, First, Middle Initial)  
Anedot, Inc.

Date of Disbursement  
MM / DD / YYYY  
11 / 12 / 2015

Mailing Address  
5555 Hilton Ave, Ste 106

City State Zip Code  
Baton Rouge, LA 70808

Purpose of Disbursement  
Merchant Fees

Candidate Name

Category/Type  
001

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
4.20

**C.** Full Name (Last, First, Middle Initial)  
Anedot, Inc.

Date of Disbursement  
MM / DD / YYYY  
11 / 16 / 2015

Mailing Address  
5555 Hilton Ave, Ste 106

City State Zip Code  
Baton Rouge, LA 70808

Purpose of Disbursement  
Merchant Fees

Candidate Name

Category/Type  
001

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
37.95

SUBTOTAL of Disbursements This Page (optional) ..... 108.47

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

201602030200048418

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) A. Praetorian Public Relations		Date of Disbursement MM / DD / YYYY 11 / 16 / 2015	
Mailing Address 32 Chestnut Place		Amount of Each Disbursement this Period 2,000.00	
City Danville, CA 94506	State CA	Zip Code 94506	Category/ Type 001
Purpose of Disbursement Campaign Consulting		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:			

Full Name (Last, First, Middle Initial) B. Praetorian Public Relations		Date of Disbursement MM / DD / YYYY 11 / 17 / 2015	
Mailing Address 32 Chestnut Place		Amount of Each Disbursement this Period 372.78	
City Danville, CA 94506	State CA	Zip Code 94506	Category/ Type 004
Purpose of Disbursement Advertising expense reimbursement		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:			

Full Name (Last, First, Middle Initial) C. Facebook Inc.		Date of Disbursement MM / DD / YYYY 11 / 17 / 2015	
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period MEMO 372.78	
City Menio Park, CA 94025	State CA	Zip Code 94025	Category/ Type 004
Purpose of Disbursement On-line advertising		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) .....

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

2,372.78

201602030200048419

**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 16	
	<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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Compupay		Date of Disbursement MM / DD / YYYY 11 / 23 / 2015	
Mailing Address 2301 Campus Drive Suite 175		Amount of Each Disbursement this Period 46.00	
City State Zip Code Irvine, CA 92612		Category/Type 001	
Purpose of Disbursement Payroll Processing Fees		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:			

B. Full Name (Last, First, Middle Initial) Anedot, Inc.		Date of Disbursement MM / DD / YYYY 11 / 24 / 2015	
Mailing Address 5555 Hilton Ave, Ste 106		Amount of Each Disbursement this Period 19.80	
City State Zip Code Baton Rouge, LA 70808		Category/Type 001	
Purpose of Disbursement Merchant Fees		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:			

C. Full Name (Last, First, Middle Initial) Praetorian Public Relations		Date of Disbursement MM / DD / YYYY 12 / 01 / 2015	
Mailing Address 32 Chestnut Place		Amount of Each Disbursement this Period 1,646.14	
City State Zip Code Danville, CA 94506		Category/Type 004	
Purpose of Disbursement On-line advertising		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1,711.94
TOTAL This Period (last page this line number only).....	

201602030200048420

**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 16	
	<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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) CampaignGrid Direct		Date of Disbursement MM / DD / YYYY 12 / 01 / 2015	
Mailing Address 701 13th St. NW #850		Amount of Each Disbursement this Period MEMO 400.00	
City Washington, DC 20005	State	Zip Code	Category/ Type 004
Purpose of Disbursement Internet Marketing			
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:		

B. Full Name (Last, First, Middle Initial) Facebook Inc.		Date of Disbursement MM / DD / YYYY 12 / 01 / 2015	
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period MEMO 1,246.14	
City Menio Park, CA 94025	State	Zip Code	Category/ Type 004
Purpose of Disbursement Advertising			
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:		

C. Full Name (Last, First, Middle Initial) Praetorian Public Relations		Date of Disbursement MM / DD / YYYY 12 / 01 / 2015	
Mailing Address 32 Chestnut Place		Amount of Each Disbursement this Period 2,000.00	
City Danville, CA 94506	State	Zip Code	Category/ Type 001
Purpose of Disbursement Campaign Consulting			
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) .....	2,000.00
TOTAL This Period (last page this line number only) .....	

201602030200048421



**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 16
	<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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Sprint		Date of Disbursement MM / DD / YYYY 12 / 01 / 2015
Mailing Address PO Box 4191		Amount of Each Disbursement this Period 66.32
City Carol Stream, IL	State IL	
Zip Code 60197	Purpose of Disbursement Phone Services	Category/ Type 001
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:	

B. Full Name (Last, First, Middle Initial) Anedot, Inc.		Date of Disbursement MM / DD / YYYY 12 / 09 / 2015
Mailing Address 5555 Hilton Ave, Ste 106		Amount of Each Disbursement this Period 6.06
City Baton Rouge, LA	State LA	
Zip Code 70808	Purpose of Disbursement Merchant Fees	Category/ Type 001
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:	

C. Full Name (Last, First, Middle Initial) Praetorian Public Relations		Date of Disbursement MM / DD / YYYY 12 / 12 / 2015
Mailing Address 32 Chestnut Place		Amount of Each Disbursement this Period 700.00
City Danville, CA	State CA	
Zip Code 94506	Purpose of Disbursement Campaign consulting and website development	Category/ Type 001
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) .....	772.38
TOTAL This Period (last page this line number only) .....	

201602030200048422

**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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

**A.**

Full Name (Last, First, Middle Initial)  
Praetorian Public Relations

Date of Disbursement  
MM / DD / YYYY  
12 / 12 / 2015

Mailing Address  
32 Chestnut Place

City State Zip Code  
Danville, CA 94506

Purpose of Disbursement  
On-line advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
749.97

Category/Type  
004

**B.**

Full Name (Last, First, Middle Initial)  
Facebook Inc.

Date of Disbursement  
MM / DD / YYYY  
12 / 12 / 2015

Mailing Address  
1601 Willow Road

City State Zip Code  
Menio Park, CA 94025

Purpose of Disbursement  
On-line advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
MEMO 749.97

Category/Type  
004

**C.**

Full Name (Last, First, Middle Initial)  
Anedot, Inc.

Date of Disbursement  
MM / DD / YYYY  
12 / 15 / 2015

Mailing Address  
5555 Hilton Ave, Ste 106

City State Zip Code  
Baton Rouge, LA 70808

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
10.05

Category/Type  
001

SUBTOTAL of Disbursements This Page (optional)..... 760.02

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

201602030200048423

**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 14 OF 16	
	<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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Anedot, Inc.		Date of Disbursement MM / DD / YYYY 12 / 16 / 2015
Mailing Address 5555 Hilton Ave, Ste 106		Amount of Each Disbursement this Period 10.74
City Baton Rouge, LA 70808	State Zip Code	
Purpose of Disbursement Merchant Fees	Category/ Type 001	
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:		

B. Full Name (Last, First, Middle Initial) Praetorian Public Relations		Date of Disbursement MM / DD / YYYY 12 / 18 / 2015
Mailing Address 32 Chestnut Place		Amount of Each Disbursement this Period 2,300.00
City Danville, CA 94506	State Zip Code	
Purpose of Disbursement Campaign consulting and website development	Category/ Type 001	
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:		

C. Full Name (Last, First, Middle Initial) Anedot, Inc.		Date of Disbursement MM / DD / YYYY 12 / 22 / 2015
Mailing Address 5555 Hilton Ave, Ste 106		Amount of Each Disbursement this Period 97.80
City Baton Rouge, LA 70808	State Zip Code	
Purpose of Disbursement Merchant Fees	Category/ Type 001	
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).....	2,408.54
TOTAL This Period (last page this line number only).....	

201602030200048424

**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 15 OF 16	
	<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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Compupay		Date of Disbursement MM / DD / YYYY 12 / 23 / 2015	
Mailing Address 2301 Campus Drive Suite 175		Amount of Each Disbursement this Period 46.00	
City State Zip Code Irvine, CA 92612		Purpose of Disbursement Payroll processing fees	
Candidate Name		Category/Type 001	
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:	

B. Full Name (Last, First, Middle Initial) Anedot, Inc.		Date of Disbursement MM / DD / YYYY 12 / 28 / 2015	
Mailing Address 5555 Hilton Ave, Ste 106		Amount of Each Disbursement this Period 2.25	
City State Zip Code Baton Rouge, LA 70808		Purpose of Disbursement Merchant fees	
Candidate Name		Category/Type 001	
Office Sought: <input 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: District: P2016	

C. Full Name (Last, First, Middle Initial) Anedot, Inc.		Date of Disbursement MM / DD / YYYY 12 / 31 / 2015	
Mailing Address 5555 Hilton Ave, Ste 106		Amount of Each Disbursement this Period 10.05	
City State Zip Code Baton Rouge, LA 70808		Purpose of Disbursement Merchant Fees	
Candidate Name		Category/Type 001	
Office Sought: <input 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: District: P2016	

SUBTOTAL of Disbursements This Page (optional).....	58.30
TOTAL This Period (last page this line number only).....	

201602030200048425

**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 16 OF 16	
	<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)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Compupay		Date of Disbursement MM / DD / YYYY 12 / 31 / 2015	
Mailing Address 2301 Campus Drive Suite 175		Amount of Each Disbursement this Period 32.77	
City State Zip Code Irvine, CA 92612		Purpose of Disbursement Payroll Tax Expense	
Candidate Name		Category/Type 001	
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:	

B. Full Name (Last, First, Middle Initial) Praetorian Public Relations		Date of Disbursement MM / DD / YYYY 12 / 31 / 2015	
Mailing Address 32 Chestnut Place		Amount of Each Disbursement this Period 2,000.00	
City State Zip Code Danville, CA 94506		Purpose of Disbursement Campaign consulting	
Candidate Name		Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

C. Full Name (Last, First, Middle Initial)		Date of Disbursement MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City State Zip Code		Purpose of Disbursement	
Candidate Name		Category/Type	
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).....	2,032.77
TOTAL This Period (last page this line number only).....	23,261.36

201602030200048426

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

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

PAGE 1 OF 1

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

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

Mailing Address  
4985 Calle Arquero

City Oceanside State CA ZIP Code 92057

Election:  
 Primary 2016  
 General  
 Other (specify) ▼

Original Amount of Loan: 2,500.00  
Cumulative Payment To Date: 0.00  
Balance Outstanding at Close of This Period: 2,500.00

TERMS

Date Incurred: MM/DD/YYYY (12/18/2015)  
Date Due: MM/DD/YYYY (None)  
Interest Rate: 0.0000 % (apr)  
Secured:  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: [ ]
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) ..... ▶ 2,500.00

TOTALS This Period (last page in this line only) ... ▶ 2,500.00

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

201602030200048427

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
 Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Advocacy Marketing LLC  
 Nature of Debt (Purpose):  
 Web Development

Mailing Address  
 801 16th Street  
 City State Zip Code  
 Sacramento, CA 95814 -

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  
 Aim Point, Inc.  
 Nature of Debt (Purpose):  
 Retainer and misc. expenses

Mailing Address  
 1020 12th Street, #401  
 City State Zip Code  
 Sacramento, CA 95814 -

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  
 Aim Point, Inc.  
 Nature of Debt (Purpose):  
 Retainer and misc. expenses

Mailing Address  
 1020 12th Street, #401  
 City State Zip Code  
 Sacramento, CA 95814 -

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) .....    
 2) TOTALS This Period (last page this line number only) .....   
 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...   
 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

201602030200048428

**SCHEDULE D (FEC Form 3)  
DEBTS AND OBLIGATIONS**  
Excluding Loans

NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rocky Chavez	Nature of Debt (Purpose): Travel Expenses						
Mailing Address 4985 Calle Arquero							
<table style="width: 100%; border: none;"> <tr> <td style="border: none;">City</td> <td style="border: none;">State</td> <td style="border: none;">Zip Code</td> </tr> <tr> <td style="border: none;">Oceanside, CA</td> <td style="border: none;"></td> <td style="border: none;">92057 -</td> </tr> </table>	City	State	Zip Code	Oceanside, CA		92057 -	
City	State	Zip Code					
Oceanside, CA		92057 -					

Outstanding Balance Beginning This Period 0.00	Amount Incurred This Period 8,840.13	Payment This Period 0.00	Outstanding Balance at Close of This Period 8,840.13
---	---	-----------------------------	---

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Communications Lab	Nature of Debt (Purpose): Social Media Consulting						
Mailing Address 701 E Chapman Ave							
<table style="width: 100%; border: none;"> <tr> <td style="border: none;">City</td> <td style="border: none;">State</td> <td style="border: none;">Zip Code</td> </tr> <tr> <td style="border: none;">Orange, CA</td> <td style="border: none;"></td> <td style="border: none;">92866 -</td> </tr> </table>	City	State	Zip Code	Orange, CA		92866 -	
City	State	Zip Code					
Orange, CA		92866 -					

Outstanding Balance Beginning This Period 2,519.95	Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2,519.95
---	-------------------------------------	-----------------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Communications Lab	Nature of Debt (Purpose): Social Media Consulting						
Mailing Address 701 E Chapman Ave							
<table style="width: 100%; border: none;"> <tr> <td style="border: none;">City</td> <td style="border: none;">State</td> <td style="border: none;">Zip Code</td> </tr> <tr> <td style="border: none;">Orange, CA</td> <td style="border: none;"></td> <td style="border: none;">92866 -</td> </tr> </table>	City	State	Zip Code	Orange, CA		92866 -	
City	State	Zip Code					
Orange, CA		92866 -					

Outstanding Balance Beginning This Period 891.05	Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 891.05
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1) SUBTOTALS This Period This Page (optional) ..... <input type="checkbox"/>	12,251.13
2) TOTALS This Period (last page this line number only) ..... <input type="checkbox"/>	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)... <input type="checkbox"/>	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) <input type="checkbox"/>	

201602030200048429



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
 Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Communications Lab  
 Nature of Debt (Purpose):  
 Google Apps

Mailing Address  
 701 E Chapman Ave

City State Zip Code  
 Orange, CA 92866 -

Outstanding Balance Beginning This Period		
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="218.23"/>	<input type="text" value="0.00"/>	<input type="text" value="218.23"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Crystal Catering  
 Nature of Debt (Purpose):  
 Food & Beverages for Fundraiser

Mailing Address  
 824 Malibu Point Way

City State Zip Code  
 Oceanside, CA 92058 -

Outstanding Balance Beginning This Period		
<input type="text" value="278.44"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="278.44"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Daizy and Associates  
 Nature of Debt (Purpose):  
 Fundraising Commission

Mailing Address  
 2446 W. BorderLinks Drive

City State Zip Code  
 Visalia, CA 93291 -

Outstanding Balance Beginning This Period		
<input type="text" value="2,666.53"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2,666.53"/>

1) SUBTOTALS This Period This Page (optional) .....	<input type="checkbox"/>	<input type="text" value="2,884.76"/>
2) TOTALS This Period (last page this line number only) .....	<input type="checkbox"/>	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	<input type="checkbox"/>	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="checkbox"/>	<input type="text"/>

201602030200048430

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
 Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Daizy and Associates		Nature of Debt (Purpose): Fundraising Commission
Mailing Address 2446 W. BorderLinks Drive		
City	State	
Visalia, CA		93291 -

Outstanding Balance Beginning This Period 2,592.52	Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2,592.52
---	-------------------------------------	-----------------------------	---

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Daizy and Associates		Nature of Debt (Purpose): Fundraising Commission
Mailing Address 2446 W. BorderLinks Drive		
City	State	
Visalia, CA		93291 -

Outstanding Balance Beginning This Period 0.00	Amount Incurred This Period 3,333.25	Payment This Period 0.00	Outstanding Balance at Close of This Period 3,333.25
---	---	-----------------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Daizy and Associates		Nature of Debt (Purpose): Fundraising commissions
Mailing Address 2446 W. BorderLinks Drive		
City	State	
Visalia, CA		93291 -

Outstanding Balance Beginning This Period 0.00	Amount Incurred This Period 757.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 757.50
---	---------------------------------------	-----------------------------	---

1) SUBTOTALS This Period This Page (optional) .....	<input type="checkbox"/>	6,683.27
2) TOTALS This Period (last page this line number only) .....	<input type="checkbox"/>	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	<input type="checkbox"/>	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="checkbox"/>	

201602030200048431

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line) PAGE 5 OF 7  
 FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (in Full)  
 Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Barrett Garcia	Nature of Debt (Purpose): Accounting Services
Mailing Address 32302 Camino Capistrano #214	
City State Zip Code San Juan Capistrano, CA 92675 -	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="0.00"/>	Amount Incurred This Period <input style="width: 100%;" type="text" value="1,800.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="1,800.00"/>
---	---	---	---

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Michael Hadland	Nature of Debt (Purpose): Campaign Consulting
Mailing Address 2772 Escala Circle	
City State Zip Code San Diego, CA 92018 -	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="1,000.00"/>	Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="1,000.00"/>
---	---	---	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Michael Hadland	Nature of Debt (Purpose): Reimbursement for Convention hotel
Mailing Address 2772 Escala Circle	
City State Zip Code San Diego, CA 92018 -	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="488.07"/>	Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="488.07"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="0.00"/>
---	---	---	---

1) SUBTOTALS This Period This Page (optional) ..... <input type="checkbox"/>	<input style="width: 100%;" type="text" value="2,800.00"/>
2) TOTALS This Period (last page this line number only) ..... <input type="checkbox"/>	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)... <input type="checkbox"/>	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) <input type="checkbox"/>	<input style="width: 100%;" type="text"/>

201602030200048432

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 6 OF 7
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zach Lierly	Nature of Debt (Purpose): Car rental expenses
Mailing Address 1117 22nd Street, #3	
City State Zip Code Sacramento, CA 95816 -	

Outstanding Balance Beginning This Period 266.66	Amount Incurred This Period 0.00	Payment This Period 266.66	Outstanding Balance at Close of This Period 0.00
---	-------------------------------------	-------------------------------	---

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Marissa Pickard	Nature of Debt (Purpose): Event Invites
Mailing Address 2107 27th Street #4	
City State Zip Code Sacramento, CA 95818 -	

Outstanding Balance Beginning This Period 250.00	Amount Incurred This Period 0.00	Payment This Period 250.00	Outstanding Balance at Close of This Period 0.00
---	-------------------------------------	-------------------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Praetorian Public Relations	Nature of Debt (Purpose): On-line Adversting
Mailing Address 32 Chestnut Place	
City State Zip Code Danville, CA 94506 -	

Outstanding Balance Beginning This Period 0.00	Amount Incurred This Period 1,368.48	Payment This Period 0.00	Outstanding Balance at Close of This Period 1,368.48
---	---	-----------------------------	---

1) SUBTOTALS This Period This Page (optional) .....	<input type="checkbox"/>	1,368.48
2) TOTALS This Period (last page this line number only) .....	<input type="checkbox"/>	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	<input type="checkbox"/>	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="checkbox"/>	

201602030200048433

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

NAME OF COMMITTEE (In Full)  
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Right Companies Inc.	Nature of Debt (Purpose): Commission of Funds raised
Mailing Address PO Box 27227	
City State Zip Code San Diego, CA 92198 -	

Outstanding Balance Beginning This Period 1,129.30	Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1,129.30
---	-------------------------------------	-----------------------------	---

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Right Companies Inc.	Nature of Debt (Purpose):
Mailing Address PO Box 27227	
City State Zip Code San Diego, CA 92198 -	

Outstanding Balance Beginning This Period 1,195.00	Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1,195.00
---	-------------------------------------	-----------------------------	---

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="checkbox"/>	2,324.30
2) TOTALS This Period (last page this line number only) .....	<input type="checkbox"/>	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	<input type="checkbox"/>	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="checkbox"/>	42,889.37

201602030200048434

PRESS FIRMLY TO SEAL

PRESS FIRMLY TO SEAL

PRIORITY MAIL  
POSTAGE REQUIRED

# PRIORITY MAIL

DATE OF DELIVERY SPECIFIED \*

USPS TRACKING™ INCLUDED \*

INSURANCE INCLUDED \*

PICKUP AVAILABLE

\* Domestic only

INTERNATIONALLY,  
A CUSTOMS DECLARATION  
LABEL MAY BE REQUIRED.

**SCREENED  
BY THE SENATE  
POST OFFICE**

 <b>UNITED STATES POSTAL SERVICE</b>		<b>Click-N-Ship®</b>	
<b>P</b>	<small>usps.com</small> <b>\$6.45</b> <b>US POSTAGE</b> Flat Rate Env	9405 5036 9930 0252 0940 16 0064 5000 0082 0013 	
	01/29/2011	Mailed from 92675 062S0000000309	
<b>PRIORITY MAIL 2-DAY™</b>			
BARRETT GARCIA BARRETT GARCIA AND CO. 32302 CAMINO CAPISTRANO STE 214 SAN JUAN CAPO CA 92675-4506		Expected Delivery Date: 02/01/16  <b>0006</b>	
Carrier -- Leave if No Response			<b>B078</b>
SHIP TO: SECRETARY OF THE SENATE OFFICE OF PUBLIC RECORDS PO BOX 77578 WASHINGTON DC 20013-8578			
<b>USPS TRACKING #</b>			
 <b>9405 5036 9930 0252 0940 16</b>			
Electronic Rate Approved #038555749			



EP14F July 2013

VISIT US AT **USPS.COM** 5 E 4 & UNITED STATES

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL **1.29.16** \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

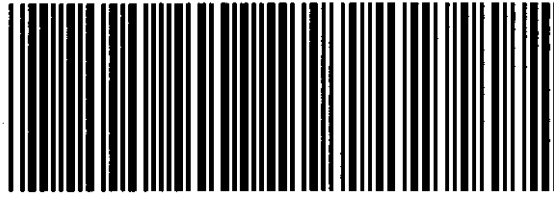
POSTMARK ILLEGIBLE  POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

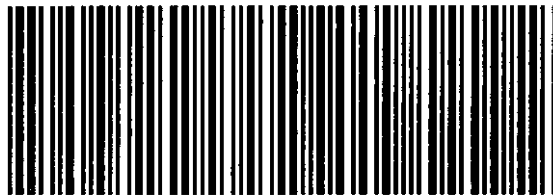
OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER \_\_\_\_\_ DATE PREPARED \_\_\_\_\_

201602030200048436



SEN PATCH



SEN PATCH

201602030200048437