

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Alas For Congress

ADDRESS (number and street)

4545 Morse Ave

Check if different  
than previously  
reported. (ACC)

Studio City

CA

91604

2. FEC IDENTIFICATION NUMBER ▼

C

C00550574

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

CA

32

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Nancy M Kremer

Signature of Treasurer

Nancy M Kremer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 34

Write or Type Committee Name

Alas For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

	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))....	28483.72	53612.64
(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)) .....	28483.72	53612.64
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	27166.75	44095.37
(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)) .....	27166.75	44095.37
8. Cash on Hand at Close of Reporting Period (from Line 27).....	9517.27	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 34

Write or Type Committee Name

**Alas For Congress**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
07 / 01 / 2014

To:

M M / D D / Y Y Y Y  
09 / 30 / 2014

**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).....

24580.72

42885.42

(ii) Unitemized.....

3903.00

10227.22

(iii) TOTAL of contributions from individuals ▶

28483.72

53112.64

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

0.00

0.00

**(d) The Candidate.....**

0.00

500.00

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

28483.72

53612.64

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

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

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)..... ▶**

28483.72

53612.64

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 34

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	27166.75	44095.37
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	27166.75	44095.37

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	8200.30
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	28483.72
25. SUBTOTAL (add Line 23 and Line 24).....	36684.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	27166.75
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	9517.27

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

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

FOR LINE NUMBER: PAGE 5 OF 34  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Alas For Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Arturo E. Alas III</b>			Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2014	
Mailing Address 225 East Colorado Blvd			<b>Transaction ID : SA11AI.4538</b>	
City	State	Zip Code		
Pasadena	CA	91101		
FEC ID number of contributing federal political committee.		C H4CA32103		
Name of Employer Dilbeck		Occupation Realtor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 552.86		
			Amount of Each Receipt this Period 52.86 In-kind - meals for volunteers	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Rosa Alas</b>			Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2014	
Mailing Address 773 Teakwood Lane			<b>Transaction ID : SA11AI.4473</b>	
City	State	Zip Code		
San Dimas	CA	91773		
FEC ID number of contributing federal political committee.		C		
Name of Employer DRC		Occupation Manager		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 214.47		
			Amount of Each Receipt this Period 214.47 In-kind - HQ Grand Opening Food	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Rosa Alas</b>			Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2014	
Mailing Address 773 Teakwood Lane			<b>Transaction ID : SA11AI.4487</b>	
City	State	Zip Code		
San Dimas	CA	91773		
FEC ID number of contributing federal political committee.		C		
Name of Employer DRC		Occupation Manager		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 464.47		
			Amount of Each Receipt this Period 250.00 Contribution	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	517.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Alas For Congress

Full Name (Last, First, Middle Initial)

Rosa Alas

Mailing Address 773 Teakwood Lane

City

San Dimas

State

CA

Zip Code

91773

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DRC

Occupation

Manager

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

614.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2014

Transaction ID : SA11AI.4489

Amount of Each Receipt this Period

150.00

Contribution

Full Name (Last, First, Middle Initial)

Rosa Alas

Mailing Address 773 Teakwood Lane

City

San Dimas

State

CA

Zip Code

91773

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DRC

Occupation

Manager

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

714.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2014

Transaction ID : SA11AI.4521

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

Rosa Alas

Mailing Address 773 Teakwood Lane

City

San Dimas

State

CA

Zip Code

91773

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DRC

Occupation

Manager

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1214.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2014

Transaction ID : SA11AI.4540

Amount of Each Receipt this Period

500.00

Contribution

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

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

750.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**Sandra Alas**

Mailing Address 225 East Colorado Blvd

City

Pasadena

State

CA

Zip Code

91101

FEC ID number of contributing federal political committee.

C

Name of Employer  
noneOccupation  
student

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

225.63

Date of Receipt

M M / D D / Y Y Y Y  
09 / 05 / 2014

Transaction ID : SA11AI.4526

Amount of Each Receipt this Period

225.63

In-kind - Office Supplies

Full Name (Last, First, Middle Initial)

**Peter Amundson**

Mailing Address 275 W Longden Ave.

City

Arcadia

State

CA

Zip Code

91007

FEC ID number of contributing federal political committee.

C

Name of Employer  
Minuteman TransportOccupation  
Transportation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 09 / 2014

Transaction ID : SA11AI.4528

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**Randall Blake**

Mailing Address 612 N Cataract Ave.

City

San Dimas

State

CA

Zip Code

91723

FEC ID number of contributing federal political committee.

C

Name of Employer  
RequestedOccupation  
Requested

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 14 / 2014

Transaction ID : SA11AI.4486

Amount of Each Receipt this Period

350.00

Contribution

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

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

1575.63

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**Merritt Brenner**

Mailing Address 309 S Charvers Ave.

City

West Covina

State

CA

Zip Code

91791

FEC ID number of contributing federal political committee.

C

Name of Employer Requested

Occupation Requested

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		27		2014

Transaction ID : SA11AI.4514

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

**Joe Cavanaugh**

Mailing Address 5334 Mountain Springs Ranch Rd

City

La Verne

State

CA

Zip Code

91750

FEC ID number of contributing federal political committee.

C

Name of Employer self

Occupation Business Owner

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Transaction ID : SA11AI.4530

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**Paul Forgette**

Mailing Address 750 Terrads Plaza  
17

City

Covina

State

CA

Zip Code

91723

FEC ID number of contributing federal political committee.

C

Name of Employer 430 Properties

Occupation Business Owner

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

Transaction ID : SA11AI.4558

Amount of Each Receipt this Period

300.00

Contribution

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

1550.00

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



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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**Albert Gersh**

Mailing Address 21900 Burbank Blvd

City

Los Angeles

State

CA

Zip Code

91367

FEC ID number of contributing federal political committee.

C

Name of Employer

PWM

Occupation

Exec

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

382.22

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2014

Transaction ID : SA11AI.4462

Amount of Each Receipt this Period

25.00

Contribution

Full Name (Last, First, Middle Initial)

**Albert Gersh**

Mailing Address 21900 Burbank Blvd

City

Los Angeles

State

CA

Zip Code

91367

FEC ID number of contributing federal political committee.

C

Name of Employer

PWM

Occupation

Exec

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

407.22

Date of Receipt

M M / D D / Y Y Y Y  
08 / 07 / 2014

Transaction ID : SA11AI.4479

Amount of Each Receipt this Period

25.00

Contribution

Full Name (Last, First, Middle Initial)

**Albert Gersh**

Mailing Address 21900 Burbank Blvd

City

Los Angeles

State

CA

Zip Code

91367

FEC ID number of contributing federal political committee.

C

Name of Employer

PWM

Occupation

Exec

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

432.22

Date of Receipt

M M / D D / Y Y Y Y  
09 / 02 / 2014

Transaction ID : SA11AI.4523

Amount of Each Receipt this Period

25.00

Contribution

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

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

75.00

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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PAGE 10 OF 34

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Alas For Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Albert Gersh</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 21900 Burbank Blvd		<b>Transaction ID : SA11AI.4563</b>
City Los Angeles	State CA	
Zip Code 91367		Amount of Each Receipt this Period Contribution 17.76
FEC ID number of contributing federal political committee. C		Contribution 449.98
Name of Employer PWM	Occupation Exec	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 449.98	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Albert Gersh</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 21900 Burbank Blvd		<b>Transaction ID : SA11AI.4564</b>
City Los Angeles	State CA	
Zip Code 91367		Amount of Each Receipt this Period Contribution 25.00
FEC ID number of contributing federal political committee. C		Contribution 474.98
Name of Employer PWM	Occupation Exec	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 474.98	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Lucinda Halley</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 14742 Cullen Street		<b>Transaction ID : SA11AI.4472</b>
City Whittier	State CA	
Zip Code 90603		Amount of Each Receipt this Period Contribution 250.00
FEC ID number of contributing federal political committee. C		Contribution 250.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	292.76
<b>TOTAL</b> This Period (last page this line number only).....	

# **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 11 OF 34

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Alas For Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Paul Hofer</b>			Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 11248 S Turner Ave			<b>Transaction ID : SA11AI.4566</b>	
City	State	Zip Code	Amount of Each Receipt this Period 500.00	
Ontario	CA	91761	Contribution	
FEC ID number of contributing federal political committee.				
Name of Employer Hofer Ranch Co.		Occupation farmer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Nancy M Kremer</b>			Date of Receipt M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 4545 Morse Ave			<b>Transaction ID : SA11AI.4457</b>	
City	State	Zip Code	Amount of Each Receipt this Period 1200.00	
Studio City	CA	91604	In-kind - accounting	
FEC ID number of contributing federal political committee.				
Name of Employer none		Occupation homemaker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3322.70		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>James Leininger</b>			Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2014	
Mailing Address 4290 Ashton Ct.			<b>Transaction ID : SA11AI.4484</b>	
City	State	Zip Code	Amount of Each Receipt this Period 500.00	
Chino	CA	91710	Contribution	
FEC ID number of contributing federal political committee.				
Name of Employer self		Occupation sales		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			2200.00	
<b>TOTAL</b> This Period (last page this line number only).....				

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

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

FOR LINE NUMBER: PAGE 12 OF 34  
 (check only one)  
☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Alas For Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Dorothea Leonard</b>			Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 147 N Mayflower Ave			<b>Transaction ID : SA11AI.4527</b>	
City Monrovia	State CA	Zip Code 91016	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		Contribution		
Name of Employer Retired		Occupation Requested		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Dorothea Leonard</b>			Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 147 N Mayflower Ave			<b>Transaction ID : SA11AI.4561</b>	
City Monrovia	State CA	Zip Code 91016	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Contribution		
Name of Employer Retired		Occupation Requested		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 550.00		

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Michael Lewis</b>			Date of Receipt M M / D D / Y Y Y Y 08 / 27 / 2014	
Mailing Address 3010 Deolinda Drive			<b>Transaction ID : SA11AI.4513</b>	
City Hacienda Heights	State CA	Zip Code 91745	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Contribution		
Name of Employer Lewis Associates, LLC		Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Alas For Congress

Full Name (Last, First, Middle Initial)

Victor Linares

Mailing Address 130 N Citrus Ave.

City

Covina

State

CA

Zip Code

91723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bread &amp; Barley

Occupation

Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2014

Transaction ID : SA11AI.4518

Amount of Each Receipt this Period

1000.00

In-kind - Event Location

Full Name (Last, First, Middle Initial)

Randall May

Mailing Address 650 N Rose Drive

City

Placentia

State

CA

Zip Code

92870

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Randall May &amp; Assoc

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2014

Transaction ID : SA11AI.4520

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

Andrew McIntyre

Mailing Address 370 East Rowland St.

City

Covina

State

CA

Zip Code

91723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McIntyre Properties

Occupation

Project Manager

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2014

Transaction ID : SA11AI.4460

Amount of Each Receipt this Period

650.00

In-kind - rent

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

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

2650.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Alas For Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Andrew McIntyre</b>			Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2014	
Mailing Address 370 East Rowland St.			<b>Transaction ID : SA11AI.4498</b>	
City	State	Zip Code		
Covina	CA	91723		
FEC ID number of contributing federal political committee.		C		
Name of Employer McIntyre Properties		Occupation Project Manager		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1300.00		
			Amount of Each Receipt this Period 650.00 In-kind - rent	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Andrew McIntyre</b>			Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 370 East Rowland St.			<b>Transaction ID : SA11AI.4553</b>	
City	State	Zip Code		
Covina	CA	91723		
FEC ID number of contributing federal political committee.		C		
Name of Employer McIntyre Properties		Occupation Project Manager		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1950.00		
			Amount of Each Receipt this Period 650.00 In-kind - rent	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>John McMahon</b>			Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2014	
Mailing Address 2772 Seminole Circle			<b>Transaction ID : SA11AI.4466</b>	
City	State	Zip Code		
Fairfield	CA	94533		
FEC ID number of contributing federal political committee.		C		
Name of Employer self		Occupation Real Estate Investor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 650.00		
			Amount of Each Receipt this Period 650.00 In-kind - rent	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1950.00
<b>TOTAL</b> This Period (last page this line number only).....	

# **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)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Alas For Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>John McMahon</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2014	
Mailing Address 2772 Seminole Circle		<b>Transaction ID : SA11AI.4499</b>	
City Fairfield	State CA	Zip Code 94533	Amount of Each Receipt this Period 650.00 In-kind - rent
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation Real Estate Investor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>John McMahon</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 2772 Seminole Circle		<b>Transaction ID : SA11AI.4554</b>	
City Fairfield	State CA	Zip Code 94533	Amount of Each Receipt this Period 650.00 In-kind - rent
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation Real Estate Investor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1950.00		

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Marry McMahon</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2014	
Mailing Address 2772 Seminole Circle		<b>Transaction ID : SA11AI.4467</b>	
City Fairfield	State CA	Zip Code 94533	Amount of Each Receipt this Period 650.00 In-kind - rent
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation Real Estate Investor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1950.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**Marry McMahon**

Mailing Address 2772 Seminole Circle

City

Fairfield

State

CA

Zip Code

94533

FEC ID number of contributing federal political committee.

C

Name of Employer  
selfOccupation  
Real Estate Investor

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1300.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 15 / 2014

Transaction ID : SA11AI.4500

Amount of Each Receipt this Period

650.00

In-kind - rent

Full Name (Last, First, Middle Initial)

**Marry McMahon**

Mailing Address 2772 Seminole Circle

City

Fairfield

State

CA

Zip Code

94533

FEC ID number of contributing federal political committee.

C

Name of Employer  
selfOccupation  
Real Estate Investor

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1950.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 15 / 2014

Transaction ID : SA11AI.4555

Amount of Each Receipt this Period

650.00

In-kind - rent

Full Name (Last, First, Middle Initial)

**Jeanne Miles**

Mailing Address 248 Monroe Pl

City

Monrovia

State

CA

Zip Code

91016

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Insurance

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 25 / 2014

Transaction ID : SA11AI.4560

Amount of Each Receipt this Period

350.00

Contribution

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

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

1650.00



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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Alas For Congress

Full Name (Last, First, Middle Initial)

Judy Nelson

Mailing Address 337 Crestglen Rd

City

Glendora

State

CA

Zip Code

91741

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bookstore

Occupation

Business Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		13		2014

Transaction ID : SA11AI.4483

Amount of Each Receipt this Period

120.00

Contribution

Full Name (Last, First, Middle Initial)

Judy Nelson

Mailing Address 337 Crestglen Rd

City

Glendora

State

CA

Zip Code

91741

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bookstore

Occupation

Business Owner

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		22		2014

Transaction ID : SA11AI.4556

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

Chris Rufer

Mailing Address 724 Main Street

City

Woodland

State

CA

Zip Code

95695

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Morning Star Company

Occupation

Agriculturalist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		15		2014

Transaction ID : SA11AI.4497

Amount of Each Receipt this Period

2500.00

Contribution

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

3620.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Alas For Congress**

Full Name (Last, First, Middle Initial)

**A. Becky Shevlin**

Mailing Address 335 N. Primrose Ave.

City  
MonroviaState  
CAZip Code  
91016FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mark M O'Brien Law FirmOccupation  
legal asst.

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		02		2014

Transaction ID : SA11AI.4522

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

**B. John Stagliano**

Mailing Address 22007 Pacific Coast Highway

City  
MalibuState  
CAZip Code  
90265FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
Artist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2014

Transaction ID : SA11AI.4474

Amount of Each Receipt this Period

2600.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Sandra Valentine**

Mailing Address 302 W Foothill

City  
GlendoraState  
CAZip Code  
91741FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fortune Escrow IncOccupation  
CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2014

Transaction ID : SA11AI.4539

Amount of Each Receipt this Period

1000.00

Contribution

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

3650.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**Robert Vaughn**

Mailing Address 5152 Crimson Place

City

Rancho Cucamonga

State

CA

Zip Code

91739

FEC ID number of contributing federal political committee.

C

Name of Employer

Los Angeles County

Occupation

EWII

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.4565

Amount of Each Receipt this Period

350.00

Contribution

Full Name (Last, First, Middle Initial)

**Sandra Vest**

Mailing Address 212 Pennington Place

City

Cloudland

State

GA

Zip Code

30731

FEC ID number of contributing federal political committee.

C

Name of Employer

Requested

Occupation

Requested

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2014

Transaction ID : SA11AI.4470

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1350.00

24580.72

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

Alas For Congress

Full Name (Last, First, Middle Initial)

**A. 4Over**

Mailing Address 5900 San Fernando Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		29		2014

City	State	Zip Code
Glendale	CA	91202

Purpose of Disbursement  
design printing

004

Category/  
Type

Candidate Name

Alas For Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Amount of Each Disbursement this Period

666.59
--------

Transaction ID : SB17.4614

**B. 4Over**

Full Name (Last, First, Middle Initial)

Mailing Address 5900 San Fernando Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2014

City	State	Zip Code
Glendale	CA	91202

Purpose of Disbursement  
refund

006

Category/  
Type

Candidate Name

Alas For Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Amount of Each Disbursement this Period

-64.87
--------

Transaction ID : SB17.4623

**C. 4Over**

Full Name (Last, First, Middle Initial)

Mailing Address 5900 San Fernando Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2014

City	State	Zip Code
Glendale	CA	91202

Purpose of Disbursement  
Printing

006

Category/  
Type

Candidate Name

Alas For Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Amount of Each Disbursement this Period

404.20
--------

Transaction ID : SB17.4629

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

1005.92

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 34

<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)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**A. Rosa Alas**

Mailing Address 773 Teakwood Lane

City	State	Zip Code
San Dimas	CA	91773

Purpose of Disbursement  
In-kind - HQ Grand Opening Food

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		03		2014

Amount of Each Disbursement this Period

214.47
--------

Transaction ID : SB17.4577

**B. Sandra Alas**

Mailing Address 225 East Colorado Blvd

City	State	Zip Code
Pasadena	CA	91101

Purpose of Disbursement  
Hotel, Food for Volunteers

Candidate Name

**Alas For Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA

District: 32

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

Amount of Each Disbursement this Period

940.93
--------

Transaction ID : SB17.4603

**c. Sandra Alas**

Mailing Address 225 East Colorado Blvd

City	State	Zip Code
Pasadena	CA	91101

Purpose of Disbursement  
Reimbursement for Food

Candidate Name

**Alas For Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA

District: 32

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

748.23
--------

Transaction ID : SB17.4612

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

1903.63

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**A. Sandra Alas**

Mailing Address 225 East Colorado Blvd

City	State	Zip Code
Pasadena	CA	91101

Purpose of Disbursement  
In-kind - Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 05 / 2014

Amount of Each Disbursement this Period

225.63
--------

Transaction ID : SB17.4572

**B. Sandra Alas**

Mailing Address 225 East Colorado Blvd

City	State	Zip Code
Pasadena	CA	91101

Purpose of Disbursement  
Event Supplies

Candidate Name

**Alas For Congress**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: CA District: 32

Date of Disbursement

M M / D D / Y Y Y Y
09 / 11 / 2014

Amount of Each Disbursement this Period

157.09
--------

Transaction ID : SB17.4619

**C. California Latino Voters Guide**Mailing Address 930 Colorado Blvd  
Bldg 2

City	State	Zip Code
Los Angeles	CA	90041

Purpose of Disbursement  
Voter Guide

Candidate Name

**Alas For Congress**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: CA District: 32

Date of Disbursement

M M / D D / Y Y Y Y
09 / 15 / 2014

Amount of Each Disbursement this Period

2500.00
---------

Transaction ID : SB17.4621

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

2882.72

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

Alas For Congress

Full Name (Last, First, Middle Initial)

**A. California Republican Party**

Mailing Address 1903 W Magnolia Blvd

City	State	Zip Code
Burbank	CA	91506

Purpose of Disbursement  
Convention

007

Category/  
Type

Candidate Name

Alas For Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA

District: 32

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	4

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Transaction ID : SB17.4615

Full Name (Last, First, Middle Initial)

**B. California Republican Party**

Mailing Address 1903 W Magnolia Blvd

City	State	Zip Code
Burbank	CA	91506

Purpose of Disbursement  
Convention

007

Category/  
Type

Candidate Name

Alas For Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA

District: 32

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	4

Amount of Each Disbursement this Period

1	0	5	.	0	0
---	---	---	---	---	---

Transaction ID : SB17.4626

Full Name (Last, First, Middle Initial)

**C. Elite Valet Services, Inc.**

Mailing Address 1220 York Ave.

City	State	Zip Code
Glendora	CA	91740

Purpose of Disbursement  
Valet Service

003

Category/  
Type

Candidate Name

Alas For Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA

District: 32

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	4

Amount of Each Disbursement this Period

3	2	5	.	0	0
---	---	---	---	---	---

Transaction ID : SB17.4617

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

930.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

Alas For Congress

Full Name (Last, First, Middle Initial)

**A. Freedom Fest**

Mailing Address PO Box 6035

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2014

City	State	Zip Code
Asheville	NC	28816

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Event

003

Transaction ID : SB17.4585

Candidate Name

Alas For Congress

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Full Name (Last, First, Middle Initial)

**B. Gold Image Printing**

Mailing Address 5784 Venice Blvd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

City	State	Zip Code
Los Angeles	CA	90019

Amount of Each Disbursement this Period

261.60
--------

Purpose of Disbursement  
Printing

004

Transaction ID : SB17.4583

Candidate Name

Alas For Congress

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Full Name (Last, First, Middle Initial)

**c. Imagine Displays, Inc.**

Mailing Address 701 Monroe Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2014

City	State	Zip Code
Placentia	CA	92870

Amount of Each Disbursement this Period

350.00
--------

Purpose of Disbursement  
tshirts

004

Transaction ID : SB17.4587

Candidate Name

Alas For Congress

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

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

1611.60



# **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 25 OF 34

☒ 17    ☐ 18    ☐ 19a    ☐ 19b  
☐ 20a    ☐ 20b    ☐ 20c    ☐ 21

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NAME OF COMMITTEE (In Full)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

## **A. Imagine Displays, Inc.**

Mailing Address 701 Monroe Way

City State Zip Code  
 Placentia CA 92870

Purpose of Disbursement  
 tshirts

Candidate Name

**Alas For Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Date of Disbursement

M M / D D / Y Y Y Y  
 08 / 07 / 2014

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.4602

## **B. Imagine Displays, Inc.**

Mailing Address 701 Monroe Way

City State Zip Code  
 Placentia CA 92870

Purpose of Disbursement  
 tshirts

Candidate Name

**Alas For Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Date of Disbursement

M M / D D / Y Y Y Y  
 09 / 15 / 2014

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.4620

## **c. Nancy M Kremer**

Mailing Address 4545 Morse Ave

City State Zip Code  
 Studio City CA 91604

Purpose of Disbursement  
 In-kind - accounting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 07 / 01 / 2014

Amount of Each Disbursement this Period

1200.00

Transaction ID : SB17.4458

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

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

1900.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**A. Calvin Lee**

Mailing Address 16043 Sierra Pass Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

City	State	Zip Code
Hacienda Heights	CA	91745

Purpose of Disbursement  
signs & stickers

004

Category/  
Type

Candidate Name

**Alas For Congress**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Amount of Each Disbursement this Period

98.08
-------

Transaction ID : SB17.4604

Full Name (Last, First, Middle Initial)

**B. Calvin Lee**

Mailing Address 16043 Sierra Pass Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

City	State	Zip Code
Hacienda Heights	CA	91745

Purpose of Disbursement  
signs & stickers

004

Category/  
Type

Candidate Name

**Alas For Congress**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Amount of Each Disbursement this Period

69.02
-------

Transaction ID : SB17.4605

Full Name (Last, First, Middle Initial)

**c. Calvin Lee**

Mailing Address 16043 Sierra Pass Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

City	State	Zip Code
Hacienda Heights	CA	91745

Purpose of Disbursement  
signs & stickers

004

Category/  
Type

Candidate Name

**Alas For Congress**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Amount of Each Disbursement this Period

17.53
-------

Transaction ID : SB17.4611

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

184.63

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

Alas For Congress

Full Name (Last, First, Middle Initial)

**A. Derek Leininger**Mailing Address 900 S Irolo  
110City State Zip Code  
Los Angeles CA 90006Purpose of Disbursement  
mileage reimbursement

Candidate Name

Alas For Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

Amount of Each Disbursement this Period

119.75
--------

Transaction ID : SB17.4618

**B. Derek Leininger**Mailing Address 900 S Irolo  
110City State Zip Code  
Los Angeles CA 90006Purpose of Disbursement  
Convention volunteer foor

Candidate Name

Alas For Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

55.35
-------

Transaction ID : SB17.4628

**c. Victor Linares**

Mailing Address 130 N Citrus Ave.

City State Zip Code  
Covina CA 91723Purpose of Disbursement  
In-kind - Event Location

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		30		2014

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.4573

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

1175.10

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**A. Marriott Hotel LAX**

Mailing Address 5855 West Century Blvd

City	State	Zip Code
Los Angeles	CA	90045

Purpose of Disbursement  
Convention

Candidate Name

**Alas For Congress**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: CA District: 32

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
09 / 21 / 2014

Amount of Each Disbursement this Period

390.70
--------

Transaction ID : SB17.4624

**B. Andrew McIntyre**

Mailing Address 370 East Rowland St.

City	State	Zip Code
Covina	CA	91723

Purpose of Disbursement  
In-kind - rent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.4580

**C. Andrew McIntyre**

Mailing Address 370 East Rowland St.

City	State	Zip Code
Covina	CA	91723

Purpose of Disbursement  
In-kind - rent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
08 / 15 / 2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.4576

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

1690.70

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

Alas For Congress

Full Name (Last, First, Middle Initial)

**A. Andrew McIntyre**

Mailing Address 370 East Rowland St.

City	State	Zip Code
Covina	CA	91723

Purpose of Disbursement  
In-kind - rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.4570

**B. John McMahon**

Mailing Address 2772 Seminole Circle

City	State	Zip Code
Fairfield	CA	94533

Purpose of Disbursement  
In-kind - rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.4579

**c. John McMahon**

Mailing Address 2772 Seminole Circle

City	State	Zip Code
Fairfield	CA	94533

Purpose of Disbursement  
In-kind - rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.4575

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

1950.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 34

<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)

Alas For Congress

Full Name (Last, First, Middle Initial)

**A. John McMahon**

Mailing Address 2772 Seminole Circle

City	State	Zip Code
Fairfield	CA	94533

Purpose of Disbursement  
In-kind - rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.4569

**B. Marry McMahon**

Mailing Address 2772 Seminole Circle

City	State	Zip Code
Fairfield	CA	94533

Purpose of Disbursement  
In-kind - rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.4578

**c. Marry McMahon**

Mailing Address 2772 Seminole Circle

City	State	Zip Code
Fairfield	CA	94533

Purpose of Disbursement  
In-kind - rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.4574

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

1950.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 34

<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)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**A. Marry McMahon**

Mailing Address 2772 Seminole Circle

City	State	Zip Code
Fairfield	CA	94533

Purpose of Disbursement  
In-kind - rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.4568

**B. NationBuilder**Mailing Address 448 Hill Street S  
200

City	State	Zip Code
Los Angeles	CA	90013

Purpose of Disbursement  
website

Candidate Name

**Alas For Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA

District: 32

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2014

Amount of Each Disbursement this Period

399.00
--------

Transaction ID : SB17.4590

**c. NationBuilder**Mailing Address 448 Hill Street S  
200

City	State	Zip Code
Los Angeles	CA	90013

Purpose of Disbursement  
website

Candidate Name

**Alas For Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA

District: 32

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

399.00
--------

Transaction ID : SB17.4613

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

1448.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 34

<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)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**A. NationBuilder**Mailing Address 448 Hill Street S  
200

City Los Angeles State CA Zip Code 90013

Purpose of Disbursement  
website

001

Category/  
Type

Candidate Name

**Alas For Congress**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Date of Disbursement

M M	D D	Y Y Y Y
09	23	2014

Amount of Each Disbursement this Period

399.00
--------

Transaction ID : SB17.4627

**B. Ortiz Catering Food**

Mailing Address 302 W Foothill

City Glendora State CA Zip Code 91741

Purpose of Disbursement  
Catering

003

Category/  
Type

Candidate Name

**Alas For Congress**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Date of Disbursement

M M	D D	Y Y Y Y
09	11	2014

Amount of Each Disbursement this Period

360.00
--------

Transaction ID : SB17.4616

**c. Palms Casino Resort**

Mailing Address 4321 West Flamingo Road

City Las Vegas State NV Zip Code 89103

Purpose of Disbursement  
Hotel

003

Category/  
Type

Candidate Name

**Alas For Congress**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2014

Amount of Each Disbursement this Period

395.36
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Transaction ID : SB17.4586

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

1154.36



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 34

<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)

**Alas For Congress**

Full Name (Last, First, Middle Initial)

**A. Ralphps**

Mailing Address 655 S Grand Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		17		2014

City	State	Zip Code
Glendora	CA	91740

Amount of Each Disbursement this Period

475.00
--------

Purpose of Disbursement  
Gas gift cards for volunteers

002

Transaction ID : SB17.4622

Candidate Name

**Alas For Congress**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
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State: CA District: 32

Full Name (Last, First, Middle Initial)

**B. Registrar Recorder County Clerk**

Mailing Address 12400 Imperial Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		08		2014

City	State	Zip Code
Norwalk	CA	90650

Amount of Each Disbursement this Period

4900.00
---------

Purpose of Disbursement  
Ballot Statement

006

Transaction ID : SB17.4607

Candidate Name

**Alas For Congress**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
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State: CA District: 32

Full Name (Last, First, Middle Initial)

**C. Southern California Edison**

Mailing Address PO Box 600

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

City	State	Zip Code
Rosemead	CA	91771

Amount of Each Disbursement this Period

595.00
--------

Purpose of Disbursement  
Utilities

001

Transaction ID : SB17.4606

Candidate Name

**Alas For Congress**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
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State: CA District: 32

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

5970.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 34

<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)

Alas For Congress

Full Name (Last, First, Middle Initial)

**A. Southern California Edison**

Mailing Address PO Box 600

City	State	Zip Code
Rosemead	CA	91771

Purpose of Disbursement  
Utilities

Candidate Name

Alas For Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: CA District: 32

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

238.89
--------

Transaction ID : SB17.4610

**B.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

--

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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

238.89

25995.55