

# 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

JOSE HERNANDEZ FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 1667

Check if different than previously reported. (ACC)

MODESTO

CA

95353

2. **FEC IDENTIFICATION NUMBER** ▼

C C00502989

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA

10

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer TOM AJA

Signature of Treasurer TOM AJA

[Electronically Filed]

Date

/  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**JOSE HERNANDEZ FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	151.72	889.28
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1.92
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	151.72	887.36
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	20340.40	56763.58
(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)).....	20340.40	56763.58
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	3906.14	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	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)

Write or Type Committee Name

**JOSE HERNANDEZ FOR CONGRESS**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	151.72	889.28
(iii) TOTAL of contributions from individuals ▶	151.72	889.28
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	151.72	889.28
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	988.54
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. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	151.72	1877.82

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20340.40	56763.58
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	1.92
(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	1.92
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	20340.40	56765.50

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	24094.82
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	151.72
25. SUBTOTAL (add Line 23 and Line 24).....	24246.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20340.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3906.14

**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 9
	<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)  
**JOSE HERNANDEZ FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Whitney W. Burns</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address P.O. Box 1174		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.4363</b>
City Springfield	State VA	
Zip Code 22151	Purpose of Disbursement Financial Compliance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Whitney W. Burns</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2012
Mailing Address P.O. Box 1174		Amount of Each Disbursement this Period 4600.00 <b>Transaction ID : SB17.4155</b>
City Springfield	State VA	
Zip Code 22151	Purpose of Disbursement Financial Compliance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 1836.53 <b>Transaction ID : SB17.4171</b>
City Ft. Lauderdale	State FL	
Zip Code 33340	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11436.53
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<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)  
**JOSE HERNANDEZ FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Daniel Krupnick</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 1313 Celeste Drive Apartment 34		Amount of Each Disbursement this Period 1458.00 <b>Transaction ID : SB17.4165</b>
City Modesto State CA Zip Code 95355	Purpose of Disbursement Travel-Mileage 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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Media Monitor</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2012
Mailing Address 612 37th St. South		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB17.4162</b>
City Birmingham State AL Zip Code 35222	Purpose of Disbursement News Clipping Service 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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Modesto Irrigation District</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2012
Mailing Address P.O. Box 4060		Amount of Each Disbursement this Period 503.96 <b>Transaction ID : SB17.4160</b>
City Modesto State CA Zip Code 95352	Purpose of Disbursement Office Utilities 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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2561.96
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
	<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)  
**JOSE HERNANDEZ FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Momentum Analysis</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 1508 Monroe St, NW		Amount of Each Disbursement this Period 3500.00
City Washington State DC Zip Code 20010	Purpose of Disbursement Polling	
Candidate Name	Category/Type	Transaction ID : SB17.4355
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>B. Remcho Johansen Purcell LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2012
Mailing Address 201 Dolores Avenue		Amount of Each Disbursement this Period 770.00
City San Leandro State CA Zip Code 94577	Purpose of Disbursement Legal Services	
Candidate Name	Category/Type	Transaction ID : SB17.4157
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>c. Spiros Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 1735 New Hampshire Ave NW Apt 102		Amount of Each Disbursement this Period 1750.00
City Washington State DC Zip Code 20009-2556	Purpose of Disbursement Research Consulting	
Candidate Name	Category/Type	Transaction ID : SB17.4357
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>SUBTOTAL</b> of Disbursements This Page (optional).....	6020.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 9	
	<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)  
**JOSE HERNANDEZ FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Spiros Consulting LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2012	
Mailing Address 1735 New Hampshire Ave NW Apt 102			Amount of Each Disbursement this Period 45.10	
City Washington	State DC	Zip Code 20009-2556	Transaction ID : SB17.4358	
Purpose of Disbursement Research Consulting		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	45.10
<b>TOTAL</b> This Period (last page this line number only).....	20063.59



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

NAME OF COMMITTEE (In Full)  
**JOSE HERNANDEZ FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Whitney W. Burns</b>		Nature of Debt (Purpose): Financial Compliance
Mailing Address P.O. Box 1174		
City State	Zip Code	
Springfield VA	22151	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4352</b>	
<input type="text" value="3300.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1700.00"/>	<input type="text" value="5000.00"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Momentum Analysis</b>		Nature of Debt (Purpose): Polling
Mailing Address 1508 Monroe St, NW		
City State	Zip Code	
Washington DC	20010	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4350</b>	
<input type="text" value="3500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="3500.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Spiros Consulting LLC</b>		Nature of Debt (Purpose): Research Consulting
Mailing Address 1735 New Hampshire Ave NW Apt 102		
City State	Zip Code	
Washington DC	20009-2556	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4351</b>	
<input type="text" value="1795.10"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="1795.10"/>	<input type="text" value="0.00"/>

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