

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

FEDERAL ELECTION COMMISSION PUBLIC DISCLOSURE DIVISION

2014 JAN 30 PM 1:17

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

LAMAR STERNAD FOR CONGRESS

ADDRESS (number and street) 19790 SW 101 AVENUE

CITY STATE ZIP CODE CUTLER BAY FL 33157 - 8607

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE STATE DISTRICT C 00505529 IS THIS REPORT NEW OR AMENDED FL 26

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) X 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 MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period 04/01/2013 through 06/30/2013

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 JUSTIN LAMAR STERNAD

Signature of Treasurer

Date 01/13/2014

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 table with 8 columns and 1 row.

14031170427

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period: From:

04 / 01 / 2013

To:

06 / 30 / 2013

	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)).....	8.70	17.40
(b) Total Contribution Refunds (from Line 20(d)).....		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8.70	17.40
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	8.70	17.40
(b) Total Offsets to Operating Expenditures (from Line 14).....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8.70	17.40
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>0.00</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>27.85</b>	

**For further information contact:**

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

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

14031170428

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M 04 / D 01 / Y 2013

To:

M 06 / D 30 / Y 2013

**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).....

(ii) Unitemized.....

(iii) TOTAL of contributions from individuals ..... ▶

(b) Political Party Committees.....

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

(d) The Candidate.....

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

8.70
8.70

17.40
17.40

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

--

--

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

(b) All Other Loans.....

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



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

--

--

**15. OTHER RECEIPTS (Dividends, Interest, etc.)**.....

--

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**16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

8.70
------

17.40
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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	8.70	17.40
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans.....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS.....		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	8.70	17.40

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8.70
25. SUBTOTAL (add Line 23 and Line 24).....	8.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

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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: PAGE 5 OF 8  
(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)  
**LAMAR STERNAD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**STERNAD, JUSTIN L.**

Mailing Address  
**19790 SW 101 AVENUE**  
City: **CUTLER BAY** State: **FL** Zip Code: **33157-8607**

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

Name of Employer: **CAMBEAN HOSPITALITY** Occupation: **HOTEL AUDITOR**

Receipt For: OPEN COMMITTEE 2012 CYCLE  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **17.40**

Date of Receipt  
**04 / 12 / 2013**

Amount of Each Receipt this Period  
**8.70**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

**8.70**

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**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 8	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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)  
**LAMAR STERNAD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A.**

**USPS**

Mailing Address  
**10360 SW 186TH STREET**

City **MIAMI** State **FL** Zip Code **33197-9998**

Purpose of Disbursement  
**POSTAGE**

Candidate Name  
**JUSTIN LAMAR STERNAD**

Office Sought:  House  Senate  President

Disbursement For: **OPEN COMMITTEE 2012 CYCLE**  
 Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

**04 / 12 / 2013**

Amount of Each Disbursement this Period

**8.70**

**001**  
Category/  
Type

**B.**

Mailing Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Amount of Each Disbursement this Period

\_\_\_\_\_

Category/  
Type

**C.**

Mailing Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Amount of Each Disbursement this Period

\_\_\_\_\_

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) \_\_\_\_\_

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

**8.70**

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**LAMAR STERNAD FOR CONGRESS**

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]  
**STERNAD, JUSTIN L.**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
**19790 SW 101 AVE.**

City State ZIP Code  
**CUTLER BAY FL 33157-8607**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>3.60</b>	<b>0.00</b>	<b>3.60</b>

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
<b>04/12/2012</b>	<b>ON DEMAND</b>	<b>0.00 % (apr)</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	<b>3.60</b>
<b>TOTALS</b> This Period (last page in this line only).....▶	

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

14031170433

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

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

PAGE 8 OF 8  
FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]  
STERNAD, JUSTIN L.

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
19790 SW 101 AVE.

City State ZIP Code  
CUTLER BAY FL 33157-8607

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25.00	0.75	24.25

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 / 30 / 2012	ON DEMAND	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/>	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) ▶ 24.25

TOTALS This Period (last page in this line only) ▶ 27.85

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

14031170434



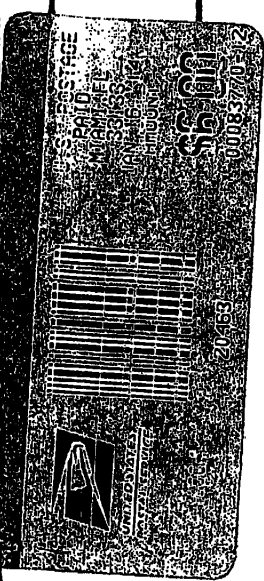
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Leonard O. Evans III  
Attorney, Enforcement Division  
Federal Election Commission  
999 E Street, N.W.  
Washington, DC 20463

14031170436



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(8/2013)

1/30/14

DATE PREPARED

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