

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

Pete Aguilar for Congress

ADDRESS (number and street)

PO Box 10954

Check if different than previously reported. (ACC)

San Bernadino

CA

92423

2. FEC IDENTIFICATION NUMBER ▼

C C00510461

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

31

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 Jon Fenster

Signature of Treasurer Jon Fenster

[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

Write or Type Committee Name

Pete Aguilar for Congress

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

	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))....	22529.97	36191.29
(b) Total Contribution Refunds (from Line 20(d))	604.72	3815.46
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	21925.25	32375.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	28022.40	66570.90
(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)).....	28022.40	66570.90
8. Cash on Hand at Close of Reporting Period (from Line 27).....	8139.12	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	28105.45	

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

Pete Aguilar 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).....	2004.54	5104.54
(ii) Unitemized.....	8025.43	13586.75
(iii) TOTAL of contributions from individuals ▶	10029.97	18691.29
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	12500.00	17500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	22529.97	36191.29
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)..... ▶	22529.97	36191.29

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	28022.40	66570.90
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	604.72	3815.46
(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)).....	604.72	3815.46
21. OTHER DISBURSEMENTS	45.00	45.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	28672.12	70431.36

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	14281.27
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	22529.97
25. SUBTOTAL (add Line 23 and Line 24).....	36811.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	28672.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8139.12

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Pete Aguilar for Congress

A. Full Name (Last, First, Middle Initial)
Fahim Ansari

Mailing Address 9306 Rowan Ln

City Houston State TX Zip Code 77036-5210

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
12 / 24 / 2014

Transaction ID : VN8JBDA8TS4

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10029.97

Date of Receipt
12 / 28 / 2014

Transaction ID : VN8JBDA8TS4E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Karen Lawrence

Mailing Address 8612 Tebbs Ln

City McLean State VA Zip Code 22102-1212

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4.54

Date of Receipt
12 / 13 / 2014

Transaction ID : VN8JBD9XPT6

Amount of Each Receipt this Period
4.54

* Earmarked Contribution: See Below

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

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

504.54

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pete Aguilar for Congress

A. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 10029.97

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : VN8JBD9XPT6E
 Amount of Each Receipt this Period
 4.54
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Karen Lawrence
 Full Name (Last, First, Middle Initial)
 Mailing Address 8612 Tebbs Ln
 City McLean State VA Zip Code 22102-1212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Retired
 N/A
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 254.54

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : VN8JBDA8VV3
 Amount of Each Receipt this Period
 250.00
 * Earmarked Contribution: See Below

C. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 10029.97

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2014
Transaction ID : VN8JBDA8VV3E
 Amount of Each Receipt this Period
 250.00
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pete Aguilar for Congress

A. Full Name (Last, First, Middle Initial)
Audrey Martinez

Mailing Address 1714 Rossmont Dr

City	State	Zip Code
Redlands	CA	92373-7218

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

Name of Employer	Occupation
N/A	Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2014

Transaction ID : VN8JBD9P5B0

Amount of Each Receipt this Period
 _____ 1000.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 10029.97

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2014

Transaction ID : VN8JBD9P5B0E

Amount of Each Receipt this Period
 _____ 1000.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Peg Yorkin

Mailing Address 21348 Pacific Coast Hwy

City	State	Zip Code
Malibu	CA	90265-5203

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

Name of Employer	Occupation
N/A	Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : VN8JBD9P476

Amount of Each Receipt this Period
 _____ 250.00

* Earmarked Contribution: See Below

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

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

_____ 1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pete Aguilar for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
10029.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2014

Transaction ID : VN8JBD9P476E

Amount of Each Receipt this Period

 250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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
 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).....

0.00

2004.54

**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 9 OF 25
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Pete Aguilar for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND

Mailing Address **PO Box 66**

City **Dania Beach** State **FL** Zip Code **33004-0066**

FEC ID number of contributing federal political committee. **C C00027532**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) **Debt General 2014**

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 12 / 2014

Transaction ID : VN8JBD9TA44

Amount of Each Receipt this Period
-5000.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND

Mailing Address **PO Box 66**

City **Dania Beach** State **FL** Zip Code **33004-0066**

FEC ID number of contributing federal political committee. **C C00027532**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 12 / 2014

Transaction ID : VN8JBD9TA78

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]
*

C. Full Name (Last, First, Middle Initial)
California Democratic Party

Mailing Address **1401 21st St Ste 200**

City **Sacramento** State **CA** Zip Code **95811-5221**

FEC ID number of contributing federal political committee. **C C00105668**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 01 / 2014

Transaction ID : VN8JBD9H9J2

Amount of Each Receipt this Period
5000.00

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

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

5000.00

5000.00

**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 10 OF 25
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pete Aguilar for Congress

A. Comcast Corporation Political Action Committee - Federal

Full Name (Last, First, Middle Initial)
Mailing Address 1701 John F Kennedy Blvd
FI 49

City Philadelphia State PA Zip Code 19103-2855

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Debt General 2014

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : VN8JBD9HA02

Amount of Each Receipt this Period
2500.00

B. DaVita Healthcare Partners Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 32275 32nd Ave S

City Federal Way State WA Zip Code 98001-9616

FEC ID number of contributing federal political committee. **C C00340943**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Debt General 2014

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 01 / 2014

Transaction ID : VN8JBD9H9N5

Amount of Each Receipt this Period
1000.00

C. NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 25 Massachusetts Ave NW
Ste 100

City Washington State DC Zip Code 20001-1434

FEC ID number of contributing federal political committee. **C C00010082**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Debt General 2014

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 17 / 2014

Transaction ID : VN8JBD9WR24

Amount of Each Receipt this Period
1000.00

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

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

4500.00

**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 25
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pete Aguilar for Congress

A. Full Name (Last, First, Middle Initial)
PG&E CORPORATION EMPLOYEES ENERGYPAC

Mailing Address 77 Beale St
Mail Code B29H

City San Francisco State CA Zip Code 94105-1814

FEC ID number of contributing federal political committee. **C** C00177469

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2014

Transaction ID : VN8JBD9NZH3

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
United Technologies PAC

Mailing Address 1101 Pennsylvania Ave NW
Fl 10

City Washington State DC Zip Code 20004-2566

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Debt General 2014

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : VN8JBD9WR73

Amount of Each Receipt this Period
 2000.00

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
 M M / 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).....

3000.00

12500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 25			
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 76.57
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : VN7K39TM2C7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 35.01
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : VN7K39TM2D5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 42.48
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : VN7K39TM6A1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	154.06
TOTAL 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 13 OF 25			
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 97.79
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : VN7K39TMT95
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 38.90
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : VN7K39TN4X2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Pete Aguilar		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2014
Mailing Address 82 Orangewood Ct		Amount of Each Disbursement this Period 1193.01
City Redlands	State CA	
Zip Code 92373-1445	Purpose of Disbursement Reimbursement (Vendors that aggregate above \$200 listed below)	Transaction ID : VN7K39TM286
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1329.70
TOTAL 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 14 OF 25			
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2014
Mailing Address 4333 Amon Carter Blvd # MD5374		Amount of Each Disbursement this Period 1193.01
City Fort Worth	State TX Zip Code 76155-2664	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7K39TR6C7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2014
Mailing Address 4333 Amon Carter Blvd # MD5374		Amount of Each Disbursement this Period 25.00
City Fort Worth	State TX Zip Code 76155-2664	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VN7K39TN4A4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Blue State Digital		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2014
Mailing Address 406 7th St NW		Amount of Each Disbursement this Period 325.00
City Washington	State DC Zip Code 20004-2260	
Purpose of Disbursement Software	Candidate Name	Transaction ID : VN7K39TMEQ8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	350.00
TOTAL 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 15 OF 25			
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. Coco McKown Photography			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2014		
Mailing Address 565 S 4th St			Amount of Each Disbursement this Period 666.00		
City Redlands	State CA	Zip Code 92373-5906	Transaction ID : VN7K39TMES3		
Purpose of Disbursement Photography		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Kaiser Permanente			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014		
Mailing Address 393 E Walnut St			Amount of Each Disbursement this Period 295.13		
City Pasadena	State CA	Zip Code 91188-0001	Transaction ID : VN7K39TM2E3		
Purpose of Disbursement Health Insurance		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Kaiser Permanente			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2014		
Mailing Address 393 E Walnut St			Amount of Each Disbursement this Period 322.51		
City Pasadena	State CA	Zip Code 91188-0001	Transaction ID : VN7K39TM6H6		
Purpose of Disbursement Health Insurance		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1283.64
TOTAL 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 16 OF 25	
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. Paychex of New York LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2014
Mailing Address 500 N Brand Blvd Ste 1400		Amount of Each Disbursement this Period 5970.33
City Glendale	State CA	
Zip Code 91203-3338	Purpose of Disbursement Payroll	Transaction ID : VN7K39TM293
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Evan M Dorner		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2014
Mailing Address 1042 Jefferson St		Amount of Each Disbursement this Period 734.86
City Upland	State CA	
Zip Code 91784-1245	Purpose of Disbursement Payroll	Transaction ID : VN7K39TNWN1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		*

Full Name (Last, First, Middle Initial) C. Matthew Liebman		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2014
Mailing Address 1233 Country Pl Apt 506		Amount of Each Disbursement this Period 2038.06
City Redlands	State CA	
Zip Code 92374-3959	Purpose of Disbursement Payroll	Transaction ID : VN7K39TNWX4
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		*

SUBTOTAL of Disbursements This Page (optional).....	5970.33
TOTAL 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 17 OF 25			
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. Boris Medzhibovsky		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2014
Mailing Address 331 1/2 La Paloma St		Amount of Each Disbursement this Period 2176.08
City Redlands	State CA	
Zip Code 92373-6013	Purpose of Disbursement Payroll	Transaction ID : VN7K39TNX15
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Tatiana P. Winograd		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2014
Mailing Address 12205 Gorham Ave Apt 3		Amount of Each Disbursement this Period 1021.33
City Los Angeles	State CA	
Zip Code 90049-4249	Purpose of Disbursement Payroll	Transaction ID : VN7K39TNX49
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex of New York LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 500 N Brand Blvd Ste 1400		Amount of Each Disbursement this Period 2830.06
City Glendale	State CA	
Zip Code 91203-3338	Purpose of Disbursement Payroll - Taxes	Transaction ID : VN7K39TM2A1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2830.06
TOTAL 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 18 OF 25			
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 500 N Brand Blvd Ste 1400			Amount of Each Disbursement this Period 55.25
City Glendale	State CA	Zip Code 91203-3338	
Purpose of Disbursement Payroll - Invoice		Category/ Type	Transaction ID : VN7K39TM2B9
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 500 N Brand Blvd Ste 1400			Amount of Each Disbursement this Period 5970.33
City Glendale	State CA	Zip Code 91203-3338	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : VN7K39TMTB0
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) C. Evan M Dorner			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 1042 Jefferson St			Amount of Each Disbursement this Period 734.87
City Upland	State CA	Zip Code 91784-1245	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : VN7K39TNWR4
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	6025.58
TOTAL 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 19 OF 25			
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. Matthew Liebman		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 1233 Country Pl Apt 506		Amount of Each Disbursement this Period 2038.06
City Redlands State CA Zip Code 92374-3959	Purpose of Disbursement Payroll	Transaction ID : VN7K39TNWZ0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Boris Medzhibovsky		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 331 1/2 La Paloma St		Amount of Each Disbursement this Period 2176.08
City Redlands State CA Zip Code 92373-6013	Purpose of Disbursement Payroll	Transaction ID : VN7K39TNX23
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Tatiana P. Winograd		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 12205 Gorham Ave Apt 3		Amount of Each Disbursement this Period 1021.32
City Los Angeles State CA Zip Code 90049-4249	Purpose of Disbursement Payroll	Transaction ID : VN7K39TNX57
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 20 OF 25			
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. Paychex of New York LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address 500 N Brand Blvd Ste 1400		Amount of Each Disbursement this Period 2830.06 Transaction ID : VN7K39TMTC8
City Glendale	State CA	
Zip Code 91203-3338	Purpose of Disbursement Payroll - Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Paychex of New York LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address 500 N Brand Blvd Ste 1400		Amount of Each Disbursement this Period 55.25 Transaction ID : VN7K39TMTD6
City Glendale	State CA	
Zip Code 91203-3338	Purpose of Disbursement Payroll - Invoice	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Paychex of New York LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 500 N Brand Blvd Ste 1400		Amount of Each Disbursement this Period 4154.54 Transaction ID : VN7K39TNET0
City Glendale	State CA	
Zip Code 91203-3338	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7039.85
TOTAL 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 21 OF 25			
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. Evan M Dorner		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 1042 Jefferson St		Amount of Each Disbursement this Period 735.94
City Upland	State CA Zip Code 91784-1245	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VN7K39TNWV8
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Matthew Liebman		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 1233 Country Pl Apt 506		Amount of Each Disbursement this Period 1152.79
City Redlands	State CA Zip Code 92374-3959	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VN7K39TNX08
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Boris Medzhibovsky		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 331 1/2 La Paloma St		Amount of Each Disbursement this Period 1242.64
City Redlands	State CA Zip Code 92373-6013	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VN7K39TNX31
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 22 OF 25	
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. Tatiana P. Winograd		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 12205 Gorham Ave Apt 3		Amount of Each Disbursement this Period 1023.17
City Los Angeles	State CA Zip Code 90049-4249	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VN7K39TNX65
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. State Compensation Insurance Fund		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address PO Box 8192		Amount of Each Disbursement this Period 412.75
City Pleasanton	State CA Zip Code 94588-8792	
Purpose of Disbursement Workers' Compensation Insurance	Category/Type	Transaction ID : VN7K39TMTA3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mondri Taylor		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 1615 Etiwanda Ave Unit 23		Amount of Each Disbursement this Period 750.00
City Rancho Cucamonga	State CA Zip Code 91739	
Purpose of Disbursement Event Catering	Category/Type	Transaction ID : VN7K39TM2J5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1162.75
TOTAL 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 23 OF 25			
	<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)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. The Strategy Group, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2014
Mailing Address 1603 Orrington Ave Ste 1730		Amount of Each Disbursement this Period 600.00 Transaction ID : VN7K39TN4Q4
City Evanston State IL Zip Code 60201-5017	Purpose of Disbursement Printing of Campaign Materials	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Uribe Printing, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2014
Mailing Address 2900 Adams St Ste A20		Amount of Each Disbursement this Period 523.50 Transaction ID : VN7K39TN4V6
City Riverside State CA Zip Code 92504-4390	Purpose of Disbursement Printing of Campaign Materials	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Virgin America		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2014
Mailing Address 555 Airport Blvd		Amount of Each Disbursement this Period 25.00 Transaction ID : VN7K39TN4T8
City Burlingame State CA Zip Code 94010-2000	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1148.50
TOTAL This Period (last page this line number only).....	27294.47

**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 24 OF 25	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Pete Aguilar for Congress

Full Name (Last, First, Middle Initial) A. California Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2014
Mailing Address 1401 21st St Ste 200		Amount of Each Disbursement this Period 45.00
City Sacramento State CA Zip Code 95811-5221	Purpose of Disbursement Federal Contribution	
Candidate Name California Democratic Party		Transaction ID : VN7K39TN4Y0
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.		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	
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) C.		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	
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	

SUBTOTAL of Disbursements This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	45.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 25 OF 25
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Pete Aguilar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Angerholzer Broz Consulting LLC (ABC)

Mailing Address 499 S Capitol St SW

City State Zip Code
 Washington DC 20003-4047

Nature of Debt (Purpose):
 Consultant - Fundraising

Outstanding Balance Beginning This Period	Transaction ID : VN5MK9H9TJ0	
5000.00	Amount Incurred This Period	Payment This Period
	0.00	0.00
		Outstanding Balance at Close of This Period
		5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
McCune Audio / Video / Lighting

Mailing Address 101 Utah Ave

City State Zip Code
 South San Francisco CA 94080-6711

Nature of Debt (Purpose):
 Audio, Video and Lighting for Event

Outstanding Balance Beginning This Period	Transaction ID : VN5MK9H9TK8	
23105.45	Amount Incurred This Period	Payment This Period
	0.00	0.00
		Outstanding Balance at Close of This Period
		23105.45

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Strategy Group, Inc.

Mailing Address 1603 Orrington Ave Ste 1730

City State Zip Code
 Evanston IL 60201-5017

Nature of Debt (Purpose):
 Design Services

Outstanding Balance Beginning This Period	Transaction ID : VN5MK9H9TM6	
600.00	Amount Incurred This Period	Payment This Period
	0.00	600.00
		Outstanding Balance at Close of This Period
		0.00

1) SUBTOTALS This Period This Page (optional)	28105.45
2) TOTALS This Period (last page this line number only)	28105.45
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	28105.45