FFC I	REPORT OF AND DISBUF For An Authorize	RSEMENTS	Office	e Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Friends of Stan Tran				
ADDRESS (number and street)	274 South Main St.			
Check if different than previously reported. (ACC)				
2. FEC IDENTIFICATION N	JMBER▼C		STATE	
C C00560490	3. IS RE	THIS × NEW PORT (N) OR	AMENDED (A)	STATE ▼ DISTRICT
<ul> <li>4. TYPE OF REPORT (Ch</li> <li>(a) Quarterly Reports:</li> <li>April 15 Quarterly R</li> <li>July 15 Quarterly R</li> <li>October 15 Quarter</li> <li>January 31 Year-Er</li> <li>Termination Report</li> </ul>	(b) 12-E Report (Q1) Report (Q2) rly Report (Q3) Ele d Report (YE) (C) 30-E	Day <b>PRE</b> -Election Report for the: Primary (12P) Convention (12C) Convention (12C) Primary (12P) Convention (12C) Convention (12C)	General (12G) Special (12S)	Runoff (12R) in the State of Special (30S) in the State of RI
5. Covering Period	M / D D / Y Y Y 06 / 2014			Y Y Y 2014
I certify that I have examined the Type or Print Name of Treasure		of my knowledge and belief it is m	true, correct and com	nplete.
Signature of Treasurer	Alyson Neary Chatham	[Electronically Filed]	Date	03 / Y Y Y Y 2014
NOTE: Submission of false, erron Office Use Only	eous, or incomplete informat	ion may subject the person signing	F	nalties of 2 U.S.C. §437g. EC FORM 3 Revised 02/2003)

Image# 14952731466

12/03/2014 15 : 03

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Ima	age# 14952731467		
	FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 7
	Vrite or Type Committee Name Friends of Stan Tran		
R	Report Covering the Period: From:	11 / D D / Y Y Y 2014 To	: 11 / 24 / Y Y Y Y 2014
		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))	0.00	9802.99
	(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))	0.00	9802.99
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	0.00	13933.89
	(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))	0.00	13933.89
8.	Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	5869.10	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	10000.00	

## For further information contact:

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

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

	FEC Form 3 (Revised 12/2003)	DETAILED SUMMARY PAGE of Receipts	PAGE 3 / 7
	or Type Committee Name ends of Stan Tran		
Repo	rt Covering the Period: From:	M / D D / Y Y Y Y 1 06 / 2014 To:	M M / D D / Y Y Y Y 11 24 2014
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CC	ONTRIBUTIONS (other than loans) FROM:		
(a)	Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	6050.00
	(ii) Unitemized (iii) TOTAL of contributions	0.00	3160.00
	from individuals	0.00	9210.00
(b)	Political Party Committees	0.00	0.00
(c)	Other Political Committees (such as PACs)	0.00	0.00
(d)		0.00	592.99
(e)	TOTAL CONTRIBUTIONS (other than loans)		
	(add Lines 11(a)(iii), (b), (c), and (d))	0.00	9802.99
	ANSFERS FROM OTHER ITHORIZED COMMITTEES	0.00	0.00
13. LC	DANS:		
(a)	Made or Guaranteed by the Candidate	0.00	10000.00
(b)	All Other Loans	0.00	0.00
(c)	TOTAL LOANS (add Lines 13(a) and (b))	0.00	10000.00
	FSETS TO OPERATING		
	PENDITURES efunds, Rebates, etc.)	0.00	0.00
	HER RECEIPTS vidends, Interest, etc.)	0.00	0.00
16. <b>TC</b>	<b>TAL RECEIPTS</b> (add Lines (e), 12, 13(c), 14, and 15)		
(C	arry Total to Line 24, page 4)	0.00	19802.99

Image# 14952731468

of Disbursements PAGE 4/7 FEC Form 3 (Revised 02/2003) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 0.00 13933.89 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans ..... (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) ..... (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 5869.10 21. OTHER DISBURSEMENTS ..... 22. TOTAL DISBURSEMENTS 0.00 19802.99 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY** 

**DETAILED SUMMARY PAGE** 

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD	Ε.	7		7	_	_	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7		7	-	-	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		7		7	_	-	0.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	Γ.	7		7	_	_	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		9		7	_	-	0.00

Image# 14952731469

CHEDULE C (FEC Form 3) OANS			Use separate sch for each category Detailed Summar	egory of the (check only one)						
AME OF COMMITTEE (In Fu	I)		Tra	ansaction	ID : SC/9.4257					
LOAN SOURCE Full Nam Mr. Stanford Tran	e (Last, First, Mi	ddle Initial)			ection: 2014 Primary General					
Mailing Address 24 Preston st					Other (specify)					
City Providence		State ZIP ( RI 0290	Code 06							
Original Amount of Loan	5869.10	Cumulative Payment	To Date 0.00	Balance	Outstanding at Close of This Per 5869.10					
TERMS Date Incurre	2014 Y rantors (if any)	Date Du M M / D D / D to Loan Source	YYYYY	Rate	Secured:					
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, N	Aiddle Initial)		Name of Employer							
Mailing Address			Occupation							
City	State	ZIP Code	Amount Guaranteed Outstanding:	7						
3. Full Name (Last, First, N	Aiddle Initial)		Name of Employer							
Mailing Address			Occupation							
City	State	ZIP Code	Amount Guaranteed Outstanding:							
4. Full Name (Last, First, N	Aiddle Initial)		Name of Employer							
Mailing Address			Occupation							
City	State	ZIP Code	Amount Guaranteed Outstanding:							
UBTOTALS This Period This	B Page (optional)		····· ►		5869.10					
<b>OTALS</b> This Period (last page	je in this line onl	у)			5869.10					

age# 14952731471									
HEDULE C (FEC Form 3) DANS		Detailed Summary Page	7 13a 13b						
ME OF COMMITTEE (In Full) riends of Stan Tran		Transaction ID : SC/10.4167							
LOAN SOURCE Full Name (Last, First, Mi	iddle Initial)	Election: 2014							
Mr. Stanford Tran		Primary General							
Mailing Address 24 Preston st		Other (specify)							
City	State ZIP Cod	de l							
Providence	RI 02906								
Original Amount of Loan	Cumulative Payment To		'erio						
5000.00		0.00 5000.00							
TERMS Date Incurred	Date Due	Interest Rate Secured:							
M05 <sup>M</sup> / D06 <sup>D</sup> / Y 2014 Y	M M / D D / Y	° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° °	No						
List All Endorsers or Guarantors (if any)	to Loan Source		110						
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:							
UBTOTALS This Period This Page (optional)		5000.00							
OTALS This Period (last page in this line on	ly)	······ •							

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 7 OF FOR LINE NUMBER: (check only one)					
AME OF COMMITTEE (In Full)		Transaction	ID : SC/10.4229					
LOAN SOURCE Full Name (Last, First Mr. Stanford Tran	, Middle Initial)		ection: 2014 Primary General					
Mailing Address 24 Preston st			Other (specify)					
City Providence	State ZIP Co RI 02906	de						
Original Amount of Loan	Cumulative Payment To	Date Balance	Outstanding at Close of This I 5000.00					
TERMS Date Incurred	Date Due	Interest Rate	Secured:					
List All Endorsers or Guarantors (if an 1. Full Name (Last, First, Middle Initial)		Name of Employer						
Mailing Address		Occupation Amount						
City Sta 2. Full Name (Last, First, Middle Initial)	te ZIP Code	Guaranteed Outstanding:						
Mailing Address		Occupation						
City Sta	te ZIP Code	Amount Guaranteed Outstanding:						
3. Full Name (Last, First, Middle Initial)		Name of Employer						
Mailing Address		Occupation						
City Sta	te ZIP Code	Amount Guaranteed Outstanding:						
4. Full Name (Last, First, Middle Initial) Mailing Address		Name of Employer						
		Occupation Amount						
City Sta	te ZIP Code	Guaranteed Outstanding:						

SUBTOTALS This Period This Page (optional)	<u> </u>	_		7	-	+	7	5000.00	
TOTALS This Period (last page in this line only)				7	_	_	7	10000.00	
Come substanding belongs only to UNE 2. Schodyle D for this line, if no Schodyle D, some forward to environmentation of Symmony									