

**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

Drew Leavens for Congress

ADDRESS (number and street)

525 E. Seaside Way, #101-C

Check if different
than previously
reported. (ACC)

Long Beach

CA

90802

2. FEC IDENTIFICATION NUMBER ▼

C

C00554493

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

CA

45

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
07 / 01 / 2014

through

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

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 Drew Leavens

Signature of Treasurer

Drew Leavens

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 15 / 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**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 35

Write or Type Committee Name

Drew Leavens for Congress

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	5494.00	26487.88
(b) Total Contribution Refunds (from Line 20(d))	200.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5294.00	26287.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	35977.01	65135.12
(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))	35977.01	65135.12
8. Cash on Hand at Close of Reporting Period (from Line 27)	8213.09	
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)	69925.34	

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)

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Write or Type Committee Name

Drew Leavens for Congress

Report Covering the Period:

From:

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

To:

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

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).....

270.00

15134.88

(ii) Unitemized.....

4974.00

8603.00

(iii) TOTAL of contributions from individuals ▶

5244.00

23737.88

(b) Political Party Committees.....

0.00

0.00

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

250.00

2750.00

(d) The Candidate.....

0.00

0.00

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

5494.00

26487.88

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

26000.00

53000.00

(b) All Other Loans.....

0.00

0.00

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

26000.00

53000.00

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

0.00

0.00

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

0.00

2509.33

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

31494.00

81997.21

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35977.01	65135.12
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	200.00	200.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	200.00	200.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	36177.01	65335.12

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	12896.10
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	31494.00
25. SUBTOTAL (add Line 23 and Line 24).....	44390.10
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	36177.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8213.09

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 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

Drew Leavens for Congress

Full Name (Last, First, Middle Initial)

Catherine Aubert

Mailing Address 310 Avenida Castilla Unit D

City

Laguna Woods

State

CA

Zip Code

92637

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

220.00

Date of Receipt

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

Transaction ID : INCA145

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Catherine Aubert

Mailing Address 310 Avenida Castilla Unit D

City

Laguna Woods

State

CA

Zip Code

92637

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

220.00

Date of Receipt

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

Transaction ID : INCA146

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

David Tannascoli

Mailing Address 6135 Cowles Mtn. Blvd.

City

La Mesa

State

CA

Zip Code

91942

FEC ID number of contributing
federal political committee.

C

Name of Employer

OJ Insulation

Occupation

Sales

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2014

Transaction ID : INCA132

Amount of Each Receipt this Period

150.00

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

270.00

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

270.00

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)

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☐ 11a 12	☐ 11b 13a	☒ 11c 13b	☐ 11d 14	☐ 15
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NAME OF COMMITTEE (In Full)

Drew Leavens for Congress

Full Name (Last, First, Middle Initial)

Laguna Woods Democratic Club

Mailing Address P.O.Box 2254

City

Laguna Hills

State

CA

Zip Code

92654

FEC ID number of contributing
federal political committee.

C C00447185

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

450.00

Date of Receipt

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

Transaction ID : INCA150

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / 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).....

250.00

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)

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

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NAME OF COMMITTEE (In Full)
Drew Leavens for Congress

Full Name (Last, First, Middle Initial)

Drew Leavens

Mailing Address P.O. Box 28672

City

San Diego

State

CA

Zip Code

92198

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Specialized Training Services

Occupation
 President

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

53000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 10 2014

Transaction ID : PAYA165

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

Drew Leavens

Mailing Address P.O. Box 28672

City

San Diego

State

CA

Zip Code

92198

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Specialized Training Services

Occupation
 President

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

53000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 04 2014

Transaction ID : PAYA167

Amount of Each Receipt this Period

11000.00

Full Name (Last, First, Middle Initial)

Drew Leavens

Mailing Address P.O. Box 28672

City

San Diego

State

CA

Zip Code

92198

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Specialized Training Services

Occupation
 President

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

53000.00

Date of Receipt

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

Transaction ID : PAYA169

Amount of Each Receipt this Period

10000.00

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

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

26000.00

26000.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA13A

Transaction ID : PAYA165

LOAN FROM PERSONAL FUNDS

Form/Schedule: SA13A

Transaction ID: PAYA167

LOAN FROM PERSONAL FUNDS

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA13A

Transaction ID : PAYA169

LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

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

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

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NAME OF COMMITTEE (In Full)

Drew Leavens for Congress

Full Name (Last, First, Middle Initial)

A. Stephens Consulting Group

Mailing Address 220 Newport Center Dr., #11

City	State	Zip Code
Newport Beach	CA	92660

Purpose of Disbursement
Consulting/Fundraising

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

Transaction ID : EXPB69

B. Boris Medzhibovsky

Mailing Address P.O. Box 14853

City	State	Zip Code
Irvine	CA	92623

Purpose of Disbursement
Campaign Consultant

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : EXPB171

C. Boris Medzhibovsky

Mailing Address P.O. Box 14853

City	State	Zip Code
Irvine	CA	92623

Purpose of Disbursement
Campaign Consultant

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

4500.00

Transaction ID : EXPB172

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

10000.00

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

PAGE 11 OF 35

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

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NAME OF COMMITTEE (In Full)

Drew Leavens for Congress

Full Name (Last, First, Middle Initial)

A. Crummitt & Associates

Mailing Address 525 E. Seaside Way, #101-C

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2014

City	State	Zip Code
Long Beach	CA	90802

Amount of Each Disbursement this Period

1810.00

Purpose of Disbursement
Treasurer Services

001

Transaction ID : EXPB119

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Tracy Van Houten

Mailing Address 1691 E. Woodbury Rd.

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2014

City	State	Zip Code
Pasadena	CA	91104

Amount of Each Disbursement this Period

755.57

Purpose of Disbursement
Facebook Advertising

004

Transaction ID : EXPB98

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank

Mailing Address P.O. Box 30086

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2014

City	State	Zip Code
Los Angeles	CA	90030-0086

Amount of Each Disbursement this Period

700.00

Purpose of Disbursement
Credit card payment

006

Transaction ID : EXPB173

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☐ Primary	☒ General
☐ Other (specify)	

State:

District:

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

3265.57

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

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SB17

Transaction ID : EXPB173

No vendor of \$200 or more

Form/Schedule:

Transaction ID:

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

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

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NAME OF COMMITTEE (In Full)

Drew Leavens for Congress

Full Name (Last, First, Middle Initial)

A. S&S Printers

Mailing Address 2100 W. Lincoln Ave.

Date of Disbursement

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

City	State	Zip Code
Anaheim	CA	92801

Amount of Each Disbursement this Period

239.99

Purpose of Disbursement
Printing

006

Transaction ID : EXPB174

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		☐ Primary ☒ General
		☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Orange County Registrar of Voters

Mailing Address 1300 S. Grand Ave., Bldg. C

Date of Disbursement

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

City	State	Zip Code
Orange	CA	92705

Amount of Each Disbursement this Period

4248.00

Purpose of Disbursement
Candidate Statement

001

Transaction ID : EXPB175

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		☐ Primary ☒ General
		☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank

Mailing Address P.O. Box 30086

Date of Disbursement

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

City	State	Zip Code
Los Angeles	CA	90030-0086

Amount of Each Disbursement this Period

5452.67

Purpose of Disbursement
Credit card payment

006

Transaction ID : EXPB176

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		☐ Primary ☒ General
		☐ Other (specify)

State: District:

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

9940.66

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

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

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NAME OF COMMITTEE (In Full)

Drew Leavens for Congress

Full Name (Last, First, Middle Initial)

A. NationBuilder

Mailing Address 234 Hill St.

City	State	Zip Code
Los Angeles	CA	90012

Purpose of Disbursement
Campaign Database

001

Category/
Type

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☐ Primary	☒ General
☐ Other (specify)	

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

799.00

Transaction ID : EDTB3EXPB176

[MEMO ITEM]

B. PriceLine.com

Mailing Address

City	State	Zip Code
Norwalk	CT	06851

Purpose of Disbursement
Travel for candidate and campaign manager

002

Category/
Type

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☐ Primary	☒ General
☐ Other (specify)	

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

1520.14

Transaction ID : EDTB4EXPB176

[MEMO ITEM]

c. A to Z Printing

Mailing Address 15520 Rockfield Blvd.

City	State	Zip Code
Irvine	CA	92618

Purpose of Disbursement
Campaign Literature

006

Category/
Type

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☐ Primary	☒ General
☐ Other (specify)	

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

212.76

Transaction ID : EDTB5EXPB176

[MEMO ITEM]

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

Drew Leavens for Congress

Full Name (Last, First, Middle Initial)

A. Southwest Airline

Mailing Address

Date of Disbursement

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

City	State	Zip Code
Dallas	TX	75235

Amount of Each Disbursement this Period

450.20

Purpose of Disbursement
Travel for candidate

002

Transaction ID : EDTB6EXPB176

Candidate Name

Category/
Type

[MEMO ITEM]

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☐ Primary	☒ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. California Democratic Party

Mailing Address 1830 9th St.

Date of Disbursement

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

City	State	Zip Code
Sacramento	CA	95814

Amount of Each Disbursement this Period

350.00

Purpose of Disbursement
Contribution

011

Transaction ID : EDTB2EXPB176

Candidate Name

California Democratic PartyCategory/
Type

[MEMO ITEM]

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☐ Primary	☒ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. NationBuilder

Mailing Address 234 Hill St.

Date of Disbursement

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

City	State	Zip Code
Los Angeles	CA	90012

Amount of Each Disbursement this Period

799.00

Purpose of Disbursement
Campaign Database

001

Transaction ID : EDTB1EXPB176

Candidate Name

Category/
Type

[MEMO ITEM]

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☐ Primary	☒ General
☐ Other (specify)	

State:

District:

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

0.00

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

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

Drew Leavens for Congress

Full Name (Last, First, Middle Initial)

A. NationBuilder

Mailing Address 234 Hill St.

City	State	Zip Code
Los Angeles	CA	90012

Purpose of Disbursement
Campaign Database

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

799.00

Transaction ID : EDTB7EXPB176

[MEMO ITEM]

B. Verizon

Mailing Address P.O. Box 1342

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement
Phone Service

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

224.56

Transaction ID : EDTB8EXPB176

[MEMO ITEM]

c. A to Z Printing

Mailing Address 15520 Rockfield Blvd.

City	State	Zip Code
Irvine	CA	92618

Purpose of Disbursement
Campaign Material

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

389.88

Transaction ID : EDTB9EXPB176

[MEMO ITEM]

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

Drew Leavens for Congress

Full Name (Last, First, Middle Initial)

A. Laguna Woods Democratic Club

Mailing Address P.O.Box 2254

Date of Disbursement

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

City	State	Zip Code
Laguna Hills	CA	92654

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
Refund of Contribution

010

Transaction ID : EXPB118

Candidate Name

Laguna Woods Democratic ClubCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

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

200.00

200.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 19 OF 35

FOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC21

Drew Leavens for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Drew Leavens

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

P.O. Box 28672

City

State

ZIP Code

San Diego

CA

92198

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 17 / 2013

Date Due

M M / D D / Y Y Y Y
12/31/2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ 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:**SUBTOTALS** This Period This Page (optional)..... ►

7500.00

TOTALS 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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : PAYC21

LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 21 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC5

Drew Leavens for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Drew Leavens

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

P.O. Box 28672

City

State

ZIP Code

San Diego

CA

92198

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 17 / 2014

Date Due

M M / D D / Y Y Y Y
/ / 12/31/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ 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:**SUBTOTALS** This Period This Page (optional)..... ►

7500.00

TOTALS 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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : PAYC5

LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 23 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC7

Drew Leavens for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Drew Leavens

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

P.O. Box 28672

City

State

ZIP Code

San Diego

CA

92198

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 10 / 2014

Date Due

M M / D D / Y Y Y Y
12/31/2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ 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:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

TOTALS 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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : PAYC7

LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 25 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC40

Drew Leavens for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Drew Leavens

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

P.O. Box 28672

City

State

ZIP Code

San Diego

CA

92198

Original Amount of Loan

7000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 01 / 2014

Date Due

M M / D D / Y Y Y Y
/ 12/31/2015

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ 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:**SUBTOTALS** This Period This Page (optional)..... ►

7000.00

TOTALS 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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : PAYC40

LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC165

Drew Leavens for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Drew Leavens

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
P.O. Box 28672

City

State

ZIP Code

San Diego

CA

92198

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 10 / 2014

Date Due

M M / D D / Y Y Y Y
/ 12/31/2015

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ 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:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

TOTALS 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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : PAYC165

LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC167

Drew Leavens for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Drew Leavens

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
P.O. Box 28672

City

State

ZIP Code

San Diego

CA

92198

Original Amount of Loan

11000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

11000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 04 / 2014

Date Due

M M / D D / Y Y Y Y
12/15/2014

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ 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:**SUBTOTALS** This Period This Page (optional)..... ►

11000.00

TOTALS 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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : PAYC167

LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC169

Drew Leavens for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Drew Leavens

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

P.O. Box 28672

City

State

ZIP Code

San Diego

CA

92198

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

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

Date Due

M M / D D / Y Y Y Y
12/15/2014

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ 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:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

TOTALS This Period (last page in this line only)..... ►

53000.00

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

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : PAYC169

LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 33 OF 35

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Drew Leavens for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Crummitt & Associates

Nature of Debt (Purpose):

Treasurer Services

Mailing Address 525 E. Seaside Way, #101-C

City State

Zip Code

Long Beach

CA

90802

Outstanding Balance Beginning This Period

1810.00

Transaction ID : PAYD86

Amount Incurred This Period

0.00

Payment This Period

1810.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Crummitt & Associates

Nature of Debt (Purpose):

Treasurer Services

Mailing Address 525 E. Seaside Way, #101-C

City State

Zip Code

Long Beach

CA

90802

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD159

Amount Incurred This Period

2060.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2060.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mimi McClurg

Nature of Debt (Purpose):

Fundraising Consulting

Mailing Address 48793 Spring Rain Ct.

City

State

Zip Code

Indio

CA

92201

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD163

Amount Incurred This Period

8613.04

Payment This Period

0.00

Outstanding Balance at Close of This Period

8613.04

1) **SUBTOTALS** This Period This Page (optional) ▶

10673.04

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 34 OF 35

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Drew Leavens for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mitchell R. Rosewitz

Nature of Debt (Purpose):

Database Management

Mailing Address 25442 Cherokee Way

City State

Zip Code

Lake Forest

CA

92630

Outstanding Balance Beginning This Period

1500.00

Transaction ID : PAYD85

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Stephens Consulting Group

Nature of Debt (Purpose):

Office Supplies

Mailing Address 220 Newport Center Dr., #11

City State

Zip Code

Newport Beach

CA

92660

Outstanding Balance Beginning This Period

750.00

Transaction ID : PAYD88

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

750.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Liesl R. Thomas

Nature of Debt (Purpose):

Deputy Campaign Manager

Mailing Address 21574 Lost River Ct.

City

State

Zip Code

Lake Forrest

CA

92630

Outstanding Balance Beginning This Period

2500.00

Transaction ID : PAYD84

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional) ▶

4750.00

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 35 OF 35

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Drew Leavens for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Tracy Van Houten

Nature of Debt (Purpose):

Facebook Advertising

Mailing Address 1691 E. Woodbury Rd.

City State

Zip Code

Pasadena

CA

91104

Outstanding Balance Beginning This Period

755.57

Transaction ID : PAYD96

Amount Incurred This Period

0.00

Payment This Period

755.57

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Wells Fargo Bank

Nature of Debt (Purpose):

Credit card

Mailing Address P.O. Box 30086

City State

Zip Code

Los Angeles

CA

90030-0086

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD177

Amount Incurred This Period

1502.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

1502.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

1502.30

2) **TOTALS** This Period (last page this line number only) ▶

16925.34

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

53000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

69925.34