

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

JONATHAN TURNER SMITH FOR CONGRESS 2014

ADDRESS (number and street) 215 West 7th Street, Suite 709

Check if different than previously reported. (ACC)

Los Angeles

CA

90014

2. **FEC IDENTIFICATION NUMBER** ▼

C C00554857

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA

34

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

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

Type or Print Name of Treasurer David L. Gould

Signature of Treasurer David L. Gould

[Electronically Filed]

Date

/ /

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

JONATHAN TURNER SMITH FOR CONGRESS 2014

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))	4765.00	0.00
(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))	4765.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6622.37	0.00
(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))	6622.37	0.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	12192.81	
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)	14050.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

JONATHAN TURNER SMITH FOR CONGRESS 2014

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).....	2900.00	-1365.00
(ii) Unitemized.....	1365.00	1365.00
(iii) TOTAL of contributions from individuals ▶	4265.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	500.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4765.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	14050.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	14050.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.18	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	18815.18	0.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6622.37	0.00
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).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6622.37	0.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18815.18
25. SUBTOTAL (add Line 23 and Line 24).....	18815.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6622.37
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	12192.81

**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 16
	<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)
JONATHAN TURNER SMITH FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
David L. Smith

Mailing Address 108 South Plaza Dr.

City Little Rock State AR Zip Code 72205

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 15 / 2014

Transaction ID : INCA4

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Alan Yamada

Mailing Address 8511 Bleriot Ave.

City Los Angeles State CA Zip Code 90045

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

Name of Employer LAUSD Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 15 / 2014

Transaction ID : INCA5

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Eric Caswell

Mailing Address 1705 Crystal Pl.

City Brownfield State TX Zip Code 79316

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

Name of Employer Edward Jones Investments Occupation Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 04 / 2014

Transaction ID : INCA7

Amount of Each Receipt this Period
200.00

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

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

950.00

**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 6 OF 16
	<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)
JONATHAN TURNER SMITH FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Jeffrey Coates

Mailing Address 101 N. Grand Ave 10

City Pasadena State CA Zip Code 91103

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

Name of Employer Warner Horizon Television Occupation TV Production Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : INCA8

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Steven Holm

Mailing Address 101 N. Grand Ave 10

City Pasadena State CA Zip Code 91103

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

Name of Employer Warner Horizon Television Occupation TV Production Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : INCA9

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Benjamin Spain

Mailing Address 350 Broderick St. #403

City Sam Francisco State CA Zip Code 94117

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

Name of Employer CDRC Occupation Psychologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 06 / 2014

Transaction ID : INCA10

Amount of Each Receipt this Period
 200.00

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

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

700.00

**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 16
	<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)
JONATHAN TURNER SMITH FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Maryanne Murphy-Parks

Mailing Address 388 Kennedy Blvd.

City Bayonne State NJ Zip Code 07002

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : INCA17

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mark Johnson

Mailing Address 1320 N. Laurel Ave. #19

City West Hollywood State CA Zip Code 90046

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

Name of Employer Mark Johnson Occupation Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : INCA40

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
John Gardner

Mailing Address 4003 S. Carson St. #B

City Aurora State CO Zip Code 80014

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

Name of Employer Cygnus Business Media Occupation Advertising Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 22 / 2014

Transaction ID : INCA42

Amount of Each Receipt this Period
 250.00

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

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

1250.00

2900.00

**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 16
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JONATHAN TURNER SMITH FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Jonathan Turner Smith

Mailing Address 215 West 7th Street, Suite 709

City Los Angeles State CA Zip Code 90014

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

Name of Employer LAUSD Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 10 / 2014

Transaction ID : INCA56

Amount of Each Receipt this Period
500.00

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 / 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 / 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).....

500.00

500.00

**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 9 OF 16
<input type="checkbox"/> 11a 12	<input checked="" 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)
JONATHAN TURNER SMITH FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Jonathan Turner Smith

Mailing Address 215 West 7th Street, Suite 709

City Los Angeles	State CA	Zip Code 90014
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FEC ID number of contributing federal political committee. **C**

Name of Employer LAUSD	Occupation Teacher
---------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		09		2014

Transaction ID : PAYA2

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jonathan Turner Smith

Mailing Address 215 West 7th Street, Suite 709

City Los Angeles	State CA	Zip Code 90014
---------------------	-------------	-------------------

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

Name of Employer LAUSD	Occupation Teacher
---------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2014

Transaction ID : PAYA16

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jonathan Turner Smith

Mailing Address 215 West 7th Street, Suite 709

City Los Angeles	State CA	Zip Code 90014
---------------------	-------------	-------------------

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

Name of Employer LAUSD	Occupation Teacher
---------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		06		2014

Transaction ID : PAYA36

Amount of Each Receipt this Period
3300.00

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

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

4050.00

**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 16
	<input type="checkbox"/> 11a 12 <input checked="" 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)
JONATHAN TURNER SMITH FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Jonathan Turner Smith

Mailing Address 215 West 7th Street, Suite 709

City Los Angeles State CA Zip Code 90014

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

Name of Employer LAUSD Occupation Teacher

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2014

Transaction ID : PAYA45

Amount of Each Receipt this Period
10000.00

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).....

10000.00

14050.00

**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 11 OF 16	
	<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)
JONATHAN TURNER SMITH FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. David Gould Company		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 3700 Wilshire Blvd. Ste. 1050-B		Amount of Each Disbursement this Period 250.00 Transaction ID : EXPB11
City Los Angeles	State CA	
Zip Code 90010	Purpose of Disbursement PAC Management/Political Reporting Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Los Angeles County Registrar-Recorder		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 12400 Imperial Hwy		Amount of Each Disbursement this Period 1750.00 Transaction ID : EXPB12
City Norwalk	State CA	
Zip Code 90650	Purpose of Disbursement Campaign Statement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. David Gould Company		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 3700 Wilshire Blvd. Ste. 1050-B		Amount of Each Disbursement this Period 500.00 Transaction ID : EXPB31
City Los Angeles	State CA	
Zip Code 90010	Purpose of Disbursement PAC Management/Political Reporting Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2500.00
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 12 OF 16	
	<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)
JONATHAN TURNER SMITH FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. David Gould Company		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 3700 Wilshire Blvd. Ste. 1050-B		Amount of Each Disbursement this Period 500.00
City Los Angeles	State CA	
Zip Code 90010	Purpose of Disbursement PAC Management/Political Reporting Services	Transaction ID : EXPB32
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Veritas Campaigns		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 2355 Westwood Blvd. Ste. 601		Amount of Each Disbursement this Period 3500.00
City Los Angeles	State CA	
Zip Code 90064	Purpose of Disbursement Campaign Management Fee	Transaction ID : EXPB37
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) 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	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	6500.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **JONATHAN TURNER SMITH FOR CONGRESS 2014** Transaction ID : **PAYC2**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Jonathan Turner Smith

Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
 215 West 7th Street, Suite 709

City State ZIP Code
 Los Angeles CA 90014

Original Amount of Loan 250.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250.00
-----------------------------------	------------------------------------	---

TERMS

Date Incurred: M 01 / D 09 / Y 2014
 Date Due: M / D / Y . None
 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)..... ▶ 250.00

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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **JONATHAN TURNER SMITH FOR CONGRESS 2014** Transaction ID : **PAYC16**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jonathan Turner Smith	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 215 West 7th Street, Suite 709	

City	State	ZIP Code
Los Angeles	CA	90014

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0.00	500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
02 / 24 / 2014	None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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).....	500.00
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.	

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **JONATHAN TURNER SMITH FOR CONGRESS 2014** Transaction ID : **PAYC36**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jonathan Turner Smith	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 215 West 7th Street, Suite 709	

City	State	ZIP Code
Los Angeles	CA	90014

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3300.00	0.00	3300.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 / 06 / 2014	None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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).....	▶	3300.00
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.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **JONATHAN TURNER SMITH FOR CONGRESS 2014** Transaction ID : **PAYC45**

LOAN SOURCE Full Name (Last, First, Middle Initial) Jonathan Turner Smith	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 215 West 7th Street, Suite 709	

City	State	ZIP Code
Los Angeles	CA	90014

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 / 28 / 2014	None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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).....	▶	14050.00

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