



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**TONY CARDENAS FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	35315.00	549966.36
(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)).....	35315.00	549966.36
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	43437.00	482877.81
(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)).....	43437.00	482877.81
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	109252.54	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	14863.17	

**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

**TONY CARDENAS 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).....	12215.00	301898.00
(ii) Unitemized.....	0.00	1416.00
(iii) TOTAL of contributions from individuals ▶	12215.00	303314.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	23100.00	246652.36
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	35315.00	549966.36
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	4936.91
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	35315.00	554903.27

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	43437.00	482877.81
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	139000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	43437.00	621877.81

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	117374.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	35315.00
25. SUBTOTAL (add Line 23 and Line 24).....	152689.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	43437.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	109252.54

**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 5 OF 32
	<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)  
**TONY CARDENAS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**62598.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 13 / 2014**

**Transaction ID : INCA1777**

Amount of Each Receipt this Period  
**5715.00**

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

Mailing Address 52 East Union Blvd.

City State Zip Code  
Bethlehem PA 18018

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

Name of Employer Occupation  
NFS Inc. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 13 / 2014**

**Transaction ID : IDTA117**

Amount of Each Receipt this Period  
**2600.00**

**[MEMO ITEM]**

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

Mailing Address 52 East Union Blvd.

City State Zip Code  
Bethlehem PA 18018

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

Name of Employer Occupation  
NFS Inc. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 13 / 2014**

**Transaction ID : IDTA116**

Amount of Each Receipt this Period  
**2600.00**

**[MEMO ITEM]**

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

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

**5715.00**

**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 32
	<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)  
**TONY CARDENAS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ken Stockton**

Mailing Address 5634 Ruthwood Drive

City Calabasas State CA Zip Code 91302

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

Name of Employer Self Employed Occupation Architect

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 13 / 2014

**Transaction ID : IDTA114**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Barona Band of Mission Indians**

Mailing Address 1095 Barona Rd.

City Lakeside State CA Zip Code 92040

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2014

**Transaction ID : INCA1774**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 460 S Evergreen Ave.

City Los Angeles State CA Zip Code 90040

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 21 / 2014

**Transaction ID : INCA1775**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

**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 32
	<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)  
**TONY CARDENAS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**INDIAN TRIBAL NATION Santa Ynez Band of Mission Ind**

Mailing Address P.O. Box 517

City Santa Ynez State CA Zip Code 93460-0517

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **8200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 05 / 2014**

**Transaction ID : INCA1789**

Amount of Each Receipt this Period  
**2000.00**

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

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **62598.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 11 / 2014**

**Transaction ID : INCA1810**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address 310 Greenwich St.

City New York State NY Zip Code 10013

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

Name of Employer Occupation  
**Nebra Business Solutions President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 11 / 2014**

**Transaction ID : IDTA118**

Amount of Each Receipt this Period  
**2000.00**

**[MEMO ITEM]**

**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 8 OF 32
	<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)  
**TONY CARDENAS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Maximiliano Trujillo**

Mailing Address 1215 19th St. NW

City Washington State DC Zip Code 20036

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

Name of Employer Tonio Burgos & Associates Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2014

**Transaction ID : IDTA119**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**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).....

0.00

12215.00

**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 32	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**TONY CARDENAS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PG&E Corporation Energy PAC**

Mailing Address 77 Beale Street

City San Francisco State CA Zip Code 94177

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 09 / 2014

**Transaction ID : INCA1759**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Build PAC of The National Association of Home Builders**

Mailing Address 1201 15th Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 21 / 2014

**Transaction ID : INCA1776**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Univision Communications Inc. PAC**

Mailing Address 3699 Wilshire Blvd. Ste. 1290

City Los Angeles State CA Zip Code 90010

FEC ID number of contributing federal political committee. **C C00435735**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : INCA1783**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

**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 32
	<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)  
**TONY CARDENAS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Edison International PAC**

Mailing Address 224 Walnut Grove Avenue

City State Zip Code  
Rosemead CA 91770

FEC ID number of contributing federal political committee. **C** C00019653

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : INCA1787**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address P.O. Box 961039

City State Zip Code  
Fort Worth TX 96103

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : INCA1793**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Tesoro Corporation Political Action Committee**

Mailing Address 19100 Ridgewood Pkw

City State Zip Code  
San Antonio TX 78259

FEC ID number of contributing federal political committee. **C** C00358366

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : INCA1792**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

**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 32
	<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)  
**TONY CARDENAS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**American Bankers Association**

Mailing Address 1120 Connecticut Avenue N.W.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : INCA1802**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AT&T Inc. Federal PAC**

Mailing Address 208 S. Akard Street Ste. 2701

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : INCA1799**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Enterprise Holdings, Inc. PAC**

Mailing Address 600 Corporate Park Drive

City St. Louis State MO Zip Code 63105

FEC ID number of contributing federal political committee. **C C00219642**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : INCA1801**

Amount of Each Receipt this Period  
2500.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 12 OF 32  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**TONY CARDENAS FOR CONGRESS**

**A. Full Name (Last, First, Middle Initial)**  
**Faama PAC**

Mailing Address 1015 Atlantic Blvd. Ste. 245

City Atlantic Beach State FL Zip Code 32233

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : INCA1798**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2345 Crystal Drive Ste. 800

City Arlington State VA Zip Code 22202

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : INCA1800**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 5300 California ave.

City Irvine State CA Zip Code 92618

FEC ID number of contributing federal political committee. **C** C00477919

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1824**

Amount of Each Receipt this Period  
 2500.00

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

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

3600.00

**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 13 OF 32
<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)  
**TONY CARDENAS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Liuna PAC**

Mailing Address 905 16th St. NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00007922**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : INCA1812**

Amount of Each Receipt this Period  
**1500.00**

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

Mailing Address 12500 Baltimore Avenue

City Beltsville State MD Zip Code 20705

FEC ID number of contributing federal political committee. **C C00489310**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : INCA1825**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**The Doctors Company Federal PAC**

Mailing Address 185 Greenwood Road

City Napa State CA Zip Code 94558

FEC ID number of contributing federal political committee. **C C00300376**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : INCA1826**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3000.00**

**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 14 OF 32
	<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)  
**TONY CARDENAS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**UA Political Education Committee**

Mailing Address 3 ark Place

City Annapolis State MD Zip Code 21401

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1813**

Amount of Each Receipt this Period  
 5000.00

**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).....

5000.00

23100.00

**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 15 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Angela Villela</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 301 N. Hagar St. #7		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : EXPB1733</b>
City San Fernando State CA Zip Code 91340	Purpose of Disbursement Data Input 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>B. Essence Marketing LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 13457 Crowley Street		Amount of Each Disbursement this Period 1650.00 <b>Transaction ID : EXPB1738</b>
City Panorama City State CA Zip Code 91402	Purpose of Disbursement Social Media Candidate Name Category/Type 004	
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>C. Gus Villela</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 12264 Willowbend Lane		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : EXPB1737</b>
City Sylmar State CA Zip Code 91342	Purpose of Disbursement Office Staffing 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2100.00
<b>TOTAL</b> 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 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. David L. Gould Company</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 3700 Wilshire Blvd., Ste.1050B		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : EXPB1739</b>
City State Zip Code Los Angeles CA 90010	Purpose of Disbursement PAC Management/Political Reporting Services 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>B. David L. Gould Company</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 3700 Wilshire Blvd., Ste.1050B		Amount of Each Disbursement this Period 200.75 <b>Transaction ID : EXPB1766</b>
City State Zip Code Los Angeles CA 90010	Purpose of Disbursement Office Expenses 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>c. David L. Gould Company</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 3700 Wilshire Blvd., Ste.1050B		Amount of Each Disbursement this Period 1830.50 <b>Transaction ID : EXPB1764</b>
City State Zip Code Los Angeles CA 90010	Purpose of Disbursement PAC Management/Political Reporting Services 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2531.25
<b>TOTAL</b> 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 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Angela Villela</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 301 N. Hagar St. #7		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : EXPB1745</b>
City San Fernando State CA Zip Code 91340	Purpose of Disbursement Data Input 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>B. Connectiva</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 1427 33rd Street NW		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : EXPB1767</b>
City Washington State DC Zip Code 20007	Purpose of Disbursement Fundraiser Management Fee Candidate Name Category/Type 003	
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>c. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2014
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 225.75 <b>Transaction ID : EXPB1778</b>
City Cambridge State MA Zip Code 02238	Purpose of Disbursement Credit Card Processing Fee Candidate Name Category/Type 003	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5425.75
<b>TOTAL</b> 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 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Chase Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 47.00 <b>Transaction ID : EXPB1769</b>
City Palatine	State IL	
Zip Code 60094-4014	Purpose of Disbursement Credit Card Payment	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>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 102.46 <b>Transaction ID : EXPB1768</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Phone 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>c. Connectiva</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 1427 33rd Street NW		Amount of Each Disbursement this Period 6307.87 <b>Transaction ID : EXPB1773</b>
City Washington	State DC	
Zip Code 20007	Purpose of Disbursement Fundraiser Expenses	Category/ Type 003
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6457.33
<b>TOTAL</b> 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 32			
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Charlie Palmer Steak</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014		
Mailing Address 101 Constitution Ave. NW			Amount of Each Disbursement this Period 1250.00		
City Washington	State DC	Zip Code 20001	Transaction ID : EDTB142EXPB1773		
Purpose of Disbursement Fundriaser Luncheon		Category/ Type 001	[MEMO ITEM]		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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>B. Fiola</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014		
Mailing Address 601 Pennsylvania Ave. N.W.			Amount of Each Disbursement this Period 2516.00		
City Washington	State DC	Zip Code 20004	Transaction ID : EDTB145EXPB1773		
Purpose of Disbursement Fundraiser Luncheon		Category/ Type 003	[MEMO ITEM]		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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>c. National Car Rental</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014		
Mailing Address Burbank International Airport			Amount of Each Disbursement this Period 597.18		
City Burbank	State CA	Zip Code 90246	Transaction ID : EDTB143EXPB1773		
Purpose of Disbursement Transportation Expenses		Category/ Type 002	[MEMO ITEM]		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Beverly Garland Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 4222 Vineland Avenue		Amount of Each Disbursement this Period 868.77
City North Hollywood	State CA Zip Code 91602	
Purpose of Disbursement Lodging	Category/Type 002	Transaction ID : EDTB144EXPB1773  [MEMO ITEM]
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>B. DLR Planning &amp; Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 4205 Cahuenga Blvd. #111		Amount of Each Disbursement this Period 109.12
City Toluca Lake	State CA Zip Code 91602	
Purpose of Disbursement Fundraiser Expenses	Category/Type 003	Transaction ID : EXPB1771
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>c. DLR Planning &amp; Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 4205 Cahuenga Blvd. #111		Amount of Each Disbursement this Period 3500.00
City Toluca Lake	State CA Zip Code 91602	
Purpose of Disbursement Fundraiser Management Fee	Category/Type 003	Transaction ID : EXPB1770
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3609.12
<b>TOTAL</b> 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 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Angela Villela</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 301 N. Hagar St. #7		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : EXPB1772</b>
City San Fernando State CA Zip Code 91340	Purpose of Disbursement Data Input 001 Category/Type	
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>B. Angela Villela</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 301 N. Hagar St. #7		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : EXPB1779</b>
City San Fernando State CA Zip Code 91340	Purpose of Disbursement Data Input 001 Category/Type	
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>C. G7 Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 8309 Laurel Canyon Blvd. #210		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : EXPB1782</b>
City Sun Valley State CA Zip Code 91352	Purpose of Disbursement Political Services 001 Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1400.00
<b>TOTAL</b> 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 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. NGP Van, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 1101 15th Street, NW Ste. 500		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : EXPB1780</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Fundraiser Management Software Candidate Name Category/Type 003	
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>B. Angela Villela</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 301 N. Hagar St. #7		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : EXPB1784</b>
City San Fernando State CA Zip Code 91340	Purpose of Disbursement Data Input 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>c. David L. Gould Company</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 3700 Wilshire Blvd., Ste.1050B		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : EXPB1788</b>
City Los Angeles State CA Zip Code 90010	Purpose of Disbursement PAC Management/Political Reporting Services 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1700.00
<b>TOTAL</b> 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 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. NGP Van, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1101 15th Street, NW Ste. 500		Amount of Each Disbursement this Period 1400.00 <b>Transaction ID : EXPB1785</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Fundraiser Management Software Candidate Name Category/Type 003	
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>B. David L. Gould Company</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 3700 Wilshire Blvd., Ste.1050B		Amount of Each Disbursement this Period 744.00 <b>Transaction ID : EXPB1790</b>
City Los Angeles State CA Zip Code 90010	Purpose of Disbursement PAC Management/Political Reporting Services 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>c. David L. Gould Company</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 3700 Wilshire Blvd., Ste.1050B		Amount of Each Disbursement this Period 200.87 <b>Transaction ID : EXPB1791</b>
City Los Angeles State CA Zip Code 90010	Purpose of Disbursement Office Expenses 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2344.87
<b>TOTAL</b> 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 24 OF 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DLR Planning &amp; Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 4205 Cahuenga Blvd. #111		Amount of Each Disbursement this Period 3500.00
City Toluca Lake	State CA	
Zip Code 91602	Purpose of Disbursement Fundraiser Managemen Fee	003 Category/ Type
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>B. DLR Planning &amp; Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 4205 Cahuenga Blvd. #111		Amount of Each Disbursement this Period 124.06
City Toluca Lake	State CA	
Zip Code 91602	Purpose of Disbursement Fundraiser Expenses	003 Category/ Type
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>c. Angela Villela</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 301 N. Hagar St. #7		Amount of Each Disbursement this Period 200.00
City San Fernando	State CA	
Zip Code 91340	Purpose of Disbursement Data Input	001 Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3824.06
<b>TOTAL</b> 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 25 OF 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address P.O. Box 7221		Amount of Each Disbursement this Period 394.39 <b>Transaction ID : EXPB1797</b>
City Pasadena	State CA	
Zip Code 91109	Purpose of Disbursement Overnight Mail	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) <b>B. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2014
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 98.75 <b>Transaction ID : EXPB1811</b>
City Cambridge	State MA	
Zip Code 02238	Purpose of Disbursement Credit Card Processing Fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. DAVID L. GOULD COMPANY MERCHANT ACCOUNT</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 3700 Wilshire Blvd., Ste.1050B		Amount of Each Disbursement this Period 157.92 <b>Transaction ID : EXPB1803</b>
City Los Angeles	State CA	
Zip Code 90010	Purpose of Disbursement Credit Card Merchant Fee & Expenses	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	394.39
<b>TOTAL</b> 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 26 OF 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Connectiva</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 1427 33rd Street NW		Amount of Each Disbursement this Period 5000.00
City Washington	State DC Zip Code 20007	
Purpose of Disbursement Fundraiser Management Fee	Category/Type 003	<b>Transaction ID : EXPB1804</b>
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>B. Essence Marketing LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 13457 Crowley Street		Amount of Each Disbursement this Period 1650.00
City Panorama City	State CA Zip Code 91402	
Purpose of Disbursement Social Media	Category/Type 004	<b>Transaction ID : EXPB1808</b>
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>c. Royal Printing Service</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address P.O. Box 1000		Amount of Each Disbursement this Period 835.43
City West New York	State NJ Zip Code 07093	
Purpose of Disbursement Printing	Category/Type 004	<b>Transaction ID : EXPB1805</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7485.43
<b>TOTAL</b> 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 27 OF 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 177.17
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Phone Service	<b>Transaction ID : EXPB1806</b>
Candidate Name	001 Category/ Type	
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>B. Angela Villela</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 301 N. Hagar St. #7		Amount of Each Disbursement this Period 200.00
City San Fernando	State CA	
Zip Code 91340	Purpose of Disbursement Data Input	<b>Transaction ID : EXPB1807</b>
Candidate Name	001 Category/ Type	
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>C. Citi Cards</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address Processing Center		Amount of Each Disbursement this Period 5787.63
City Des Moines	State IA	
Zip Code 50363-0005	Purpose of Disbursement Credit Card Payment	<b>Transaction ID : EXPB1809</b>
Candidate Name	001 Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6164.80
<b>TOTAL</b> 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 28 OF 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 4333 Amon Carter Blvd.		Amount of Each Disbursement this Period 935.90
City Fort Worth	State TX	
Zip Code 76155		Transaction ID : EDTB147EXPB1809
Purpose of Disbursement Travel Expense	Category/ Type 002	
Candidate Name		[MEMO ITEM]
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>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 4333 Amon Carter Blvd.		Amount of Each Disbursement this Period 482.00
City Fort Worth	State TX	
Zip Code 76155		Transaction ID : EDTB151EXPB1809
Purpose of Disbursement Travel Expense	Category/ Type 002	
Candidate Name		[MEMO ITEM]
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>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 4333 Amon Carter Blvd.		Amount of Each Disbursement this Period 482.00
City Fort Worth	State TX	
Zip Code 76155		Transaction ID : EDTB150EXPB1809
Purpose of Disbursement Travel Expense	Category/ Type 002	
Candidate Name		[MEMO ITEM]
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: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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 29 OF 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 4333 Amon Carter Blvd.		Amount of Each Disbursement this Period 482.00
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Travel Expense	Transaction ID : EDTB149EXPB1809
Candidate Name	002 Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 4333 Amon Carter Blvd.		Amount of Each Disbursement this Period 935.90
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Travel Expense	Transaction ID : EDTB148EXPB1809
Candidate Name	002 Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Westin Lake</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 101 Montelago Blvd.		Amount of Each Disbursement this Period 277.27
City Las Vegas	State NV	
Zip Code 89011	Purpose of Disbursement Lodging	Transaction ID : EDTB146EXPB1809
Candidate Name	002 Category/Type	
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)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 30 OF 32	
	<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)  
**TONY CARDENAS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. B &amp; H Photo-Video</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 420 Ninth Ave. NW 34th Street		Amount of Each Disbursement this Period 398.00
City Manhattan	State NY	
Zip Code 20012	Purpose of Disbursement 001	Transaction ID : EDTB153EXPB1809
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bistro Bis</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 15 E St. NW		Amount of Each Disbursement this Period 356.68
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Meeting Expense 001	Transaction ID : EDTB152EXPB1809
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</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	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	43437.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**TONY CARDENAS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Citi Cards</b>	Nature of Debt (Purpose): Credit Card Charges
Mailing Address Processing Center	
City State Zip Code Des Moines IA 50363-0005	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="5000.00"/>	<b>Transaction ID : PAYD1620</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="5000.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Citi Cards</b>	Nature of Debt (Purpose): Credit Card Payment
Mailing Address Processing Center	
City State Zip Code Des Moines IA 50363-0005	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : PAYD1830</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="6663.17"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="6663.17"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>G7 Group</b>	Nature of Debt (Purpose): Political Services
Mailing Address 8309 Laurel Canyon Blvd. #210	
City State Zip Code Sun Valley CA 91352	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : PAYD1815</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="1000.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1000.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%;" type="text" value="12663.17"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text" value="0.00"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text" value="0.00"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 32 OF 32
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**TONY CARDENAS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gabriela Marquez</b>		Nature of Debt (Purpose): Political Services
Mailing Address 8133 Sepulveda Blvd. #119		
City	State	Zip Code
North Hills	CA	91343

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD1818</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gabriela Marquez</b>		Nature of Debt (Purpose): Political Services
Mailing Address 8133 Sepulveda Blvd. #119		
City	State	Zip Code
North Hills	CA	91343

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD1819</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>NGP Van, Inc.</b>		Nature of Debt (Purpose): Fundraiser Management Software
Mailing Address 1101 15th Street, NW Ste. 500		
City	State	Zip Code
Washington	DC	20005

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD1334</b>	
<input type="text" value="3600.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="2400.00"/>	<input type="text" value="1200.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="2200.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="14863.17"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="14863.17"/>