

# 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

Whelan For Congress

ADDRESS (number and street) ▼

7447 N 1st Street

Suite 201

Check if different than previously reported. (ACC)

Fresno

CA

93720-2845

2. FEC IDENTIFICATION NUMBER ▼

C C00506709

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

16

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

11 / 27 / 2012

through

M M /

D D /

Y Y Y Y

12 / 31 / 2012

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 Kelly Lawler

Signature of Treasurer Kelly Lawler

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

01 / 31 / 2013

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  
**Whelan 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)) ....	250	250
(b) Total Contribution Refunds (from Line 20(d)) .....	1400	1400
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	-1150	-1150
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	1385.43	11966.77
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	1385.43	11966.77
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>11584.79</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>30000</b>	

**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

**Whelan For Congress**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	250	250
(ii) Unitemized.....	0	0
(iii) TOTAL of contributions from individuals ▶	250	250
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	250	250
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	0
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0	0
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	250	250

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1385.43	11966.77
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	20000	170000
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	20000	170000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	1400	1400
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1400	1400
21. OTHER DISBURSEMENTS .....	0	0
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	22785.43	183366.77

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	34120.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	250
25. SUBTOTAL (add Line 23 and Line 24).....	34370.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	22785.43
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	11584.79

**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 12
	<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)  
**Whelan For Congress**

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

Mailing Address 1434 Franklin Road

City Merced State CA Zip Code 95341-8852

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2012

**Transaction ID : A-C1332**

Amount of Each Receipt this Period  
 250

Debt Retirement

**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).....

250.00

250.00

**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 6 OF 12	
	<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)  
**Whelan For Congress**

Full Name (Last, First, Middle Initial) <b>A. The KAL Group</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012
Mailing Address PO Box 984		Amount of Each Disbursement this Period 899.18 <b>Transaction ID : B-E-1330</b>
City Willows	State CA	
Zip Code 95988-0984	Purpose of Disbursement Bookkeeping	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CompleteCampaigns.com a division of Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 15 <b>Transaction ID : B-E-1324</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Credit card processing fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CompleteCampaigns.com a division of Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 27.5 <b>Transaction ID : B-E-1323</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Credit card processing fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	941.68
<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 7 OF 12	
	<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)  
**Whelan For Congress**

Full Name (Last, First, Middle Initial) <b>A. Brian D Whelan</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012
Mailing Address 7447 N 1st Street Suite 201		Amount of Each Disbursement this Period 160 <b>Transaction ID : B-E-1228</b>
City Fresno	State CA Zip Code 93720-2845	
Purpose of Disbursement Administrative/Salary/Overhead: Postage	001	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CompleteCampaigns.com a division of Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 278.75 <b>Transaction ID : B-E-1326</b>
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Credit card processing fees	001	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CompleteCampaigns.com a division of Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 5 <b>Transaction ID : B-E-1320</b>
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Credit Card Processing Fees	001	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	443.75
<b>TOTAL</b> This Period (last page this line number only).....	1385.43

**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 8 OF 12	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Whelan For Congress**

Full Name (Last, First, Middle Initial) <b>A. Brian D Whelan</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 20 / 2012</b>
Mailing Address <b>7447 N 1st Street Suite 201</b>		Amount of Each Disbursement this Period <b>20000</b>
City <b>Fresno</b> State <b>CA</b> Zip Code <b>93720-2845</b>	Purpose of Disbursement <b>Loan Repayment</b>	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : B-R-6</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</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	Category/ Type	
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>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	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>20000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>20000.00</b>



**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 9 OF 12			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Whelan For Congress**

Full Name (Last, First, Middle Initial) <b>A. Pamela Freeman Fobbs</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2012
Mailing Address PO Box 26990		Amount of Each Disbursement this Period 200 <b>Transaction ID : B-E-1321</b>
City Fresno	State CA	
Zip Code 93729-6990	Purpose of Disbursement Contribution Refund: Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Jason Hornor</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 11833 W California Avenue		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-1325</b>
City Fresno	State CA	
Zip Code 93706-9307	Purpose of Disbursement Contribution Refund: Contribution Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. HD Matthews Demolition &amp; Excavation</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012
Mailing Address PO Box 12483		Amount of Each Disbursement this Period 450 <b>Transaction ID : B-E-1328</b>
City Fresno	State CA	
Zip Code 93778-2483	Purpose of Disbursement Contribution Refund: Corporate Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1150.00
<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 10 OF 12			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Whelan For Congress**

Full Name (Last, First, Middle Initial) <b>A. Rabbate Enterprises dba Valley Signs</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 30 / 2012</b>
Mailing Address <b>140 Heron Way</b>			Amount of Each Disbursement this Period <b>250</b>
City <b>Merced</b>	State <b>CA</b>	Zip Code <b>95341-8005</b>	<b>Transaction ID : B-E-1329</b>
Purpose of Disbursement <b>Contribution Refund: Corporate Refund</b>		Category/ Type <b>010</b>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2012</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) <b>B.</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		Category/ Type	
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>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		Category/ Type	
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: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1400.00</b>

**SCHEDULE C (FEC Form 3)  
LOANS**

NAME OF COMMITTEE (In Full) **Whelan For Congress** Transaction ID : **SC/10-L3**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Brian D Whelan</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2012
Mailing Address 7447 N 1st Street Suite 201		

City	State	ZIP Code
Fresno	CA	93720-2845

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200000	170000	30000

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 23 / Y 2012	M M / D D / Y 12/31/2014	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:

<b>SUBTOTALS</b> This Period This Page (optional).....	30000.00
<b>TOTALS</b> This Period (last page in this line only).....	30000.00

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

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Whelan For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Brian D Whelan</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Postage
Mailing Address 7447 N 1st Street Suite 201	
City State Zip Code Fresno CA 93720-2845	

Outstanding Balance Beginning This Period <input type="text" value="160"/>	<b>Transaction ID : SD10-DEBT1228</b>	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="160"/>	Outstanding Balance at Close of This Period <input type="text" value="0"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lionel Largaespada</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Void Duplicate Expense
Mailing Address 868 Oxford Way	
City State Zip Code Benicia CA 94510-3647	

Outstanding Balance Beginning This Period <input type="text" value="1000"/>	<b>Transaction ID : SD10-DEBT1334</b>	
Amount Incurred This Period <input type="text" value="-1000"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="0"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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