

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

Rafael Dagnesses for Congress 2014

ADDRESS (number and street) 65 W Easy Street
Suite 102
Simi Valley CA 93065-6201

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** ▼

C C00550756

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA 26

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 06 / 03 / 2014 in the State of CA

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

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

Election on / / in the State of

5. Covering Period 04 / 01 / 2014 through 05 / 14 / 2014

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

Type or Print Name of Treasurer Bryan Burch

Signature of Treasurer Bryan Burch

[Electronically Filed]

Date

05 / 22 / 2014

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

Office Use Only								
-----------------	--	--	--	--	--	--	--	--

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Rafael Dagnesses 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))....	5740	54840
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	5740	54840
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	23992.69	64083.3
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	23992.69	64083.3
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5756.7	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	16434.93	

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

Rafael Dagnesses 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).....	4950	36540
(ii) Unitemized.....	790	8340
(iii) TOTAL of contributions from individuals ▶	5740	44880
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) The Candidate.....	0	9960
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5740	54840
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	15000
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	15000
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	5740	69840

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	23992.69	64083.3
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(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)).....	0	0
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	23992.69	64083.3

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	24009.39
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5740
25. SUBTOTAL (add Line 23 and Line 24).....	29749.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	23992.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5756.7

**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 15
	<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)
Rafael Dagnesses for Congress 2014

A. Full Name (Last, First, Middle Initial)
Scotia Alves

Mailing Address 3283 Calle De Debesa

City Camarillo State CA Zip Code 93010

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

Name of Employer Scosche Industries Occupation Owner/Operator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : A-CF202

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mr. Geoffrey A Schneider

Mailing Address 410 El Paseo Road

City Ojai State CA Zip Code 93023-2450

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

Name of Employer Self Occupation Psychotherapist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 19 / 2014

Transaction ID : A-CF196

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Aurora Vitar

Mailing Address 4654 Gainsborough Avenue

City Los Angeles State CA Zip Code 90027-1229

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

Name of Employer Self Occupation Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 10 / 2014

Transaction ID : A-CF222

Amount of Each Receipt this Period
500

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 6 OF 15
	<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)
Rafael Dagnesses for Congress 2014

A. Full Name (Last, First, Middle Initial)
Mr. Scott Kuperman

Mailing Address 7307 Swan Way

City State Zip Code
Cary IL 60013-6040

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

Name of Employer Occupation
Paint Platoon USA Painting Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

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

Transaction ID : A-CF199

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Angel Soca

Mailing Address Unit 3130

City State Zip Code
DPO AA 34034-9997

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

Name of Employer Occupation
US Government Armed Forces

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 03 / 2014

Transaction ID : A-CF209

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Vince Saronian

Mailing Address 11947 Kling St.

City State Zip Code
Valley Village CA 91607

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

Name of Employer Occupation
F & M Bank Mortgage Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 10 / 2014

Transaction ID : A-CF221

Amount of Each Receipt this Period
500

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

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

850.00

**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 15
	<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)
Rafael Dagnesses for Congress 2014

A. Full Name (Last, First, Middle Initial)
Vince Saronian

Mailing Address 11947 Kling St.

City Valley Village State CA Zip Code 91607

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

Name of Employer F & M Bank Occupation Mortgage Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : A-CF204

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Pablo Vitar

Mailing Address 4654 Gainsborough Avenue

City Los Angeles State CA Zip Code 90027-1229

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

Name of Employer 31st & Fig Development LLC Occupation Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 10 / 2014

Transaction ID : A-CF223

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Roger J. Alves

Mailing Address 3283 Calle De Debesa

City Camarillo State CA Zip Code 93010-8337

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

Name of Employer Scosche Ind. Inc Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : A-CF203

Amount of Each Receipt this Period
1000

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 8 OF 15		
	<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)
Rafael Dagnesses for Congress 2014

A. Full Name (Last, First, Middle Initial)
Javier Munoz

Mailing Address 9517 Arrington Avenue

City Downey State CA Zip Code 90240-3401

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

Name of Employer Downey Exterminating Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 08 / 2014

Transaction ID : A-CF212

Amount of Each Receipt this Period
100

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).....

100.00

4950.00

**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 9 OF 15			
	<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)
Rafael Dagnesses for Congress 2014

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 3rd Street, Suite B		Amount of Each Disbursement this Period 35.35
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : B-E-217
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. Rafael Dagnesses-Personal Funds		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 65 W Easy Street Suite 102		Amount of Each Disbursement this Period 2800
City Simi Valley	State CA	
Zip Code 93065-6201	Purpose of Disbursement Reimb. for State Mailer Fees	Transaction ID : B-E-165
Candidate Name	004 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) c. Gabriela Murillo		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 3303 Deaver Drive		Amount of Each Disbursement this Period 3500
City Corona	State CA	
Zip Code 92882-8791	Purpose of Disbursement Monthly Consulting Retainer	Transaction ID : B-E-167
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:		

SUBTOTAL of Disbursements This Page (optional).....	6335.35
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 10 OF 15			
	<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)
Rafael Dagnesses for Congress 2014

Full Name (Last, First, Middle Initial) A. Anedot, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 3rd Street, Suite B		Amount of Each Disbursement this Period 68.9
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : B-E-193
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. Gabriela Murillo		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 3303 Deaver Drive		Amount of Each Disbursement this Period 3500
City Corona	State CA	
Zip Code 92882-8791	Purpose of Disbursement Campaign Manager Fees	Transaction ID : B-E-192
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) C. Political Finance Solutions, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 1022 G Street Suite B		Amount of Each Disbursement this Period 739.18
City Sacramento	State CA	
Zip Code 95814-0823	Purpose of Disbursement Accounting & Compliance	Transaction ID : B-E-190
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:		

SUBTOTAL of Disbursements This Page (optional).....	4308.08
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 11 OF 15			
	<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)
Rafael Dagnesses for Congress 2014

Full Name (Last, First, Middle Initial) A. The ACORN Newspapers		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 30423 Canwood Street Suite 108		Amount of Each Disbursement this Period 5980 Transaction ID : B-E-200
City Agoura Hills State CA Zip Code 91301-4313	Purpose of Disbursement Advertising: Ad placement 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. Rafael Dagnesses-Personal Funds		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 65 W Easy Street Suite 102		Amount of Each Disbursement this Period 2500 Transaction ID : B-E-164
City Simi Valley State CA Zip Code 93065-6201	Purpose of Disbursement Reimb. for State Mailer Fees 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) C. Rafael Dagnesses-Personal Funds		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 65 W Easy Street Suite 102		Amount of Each Disbursement this Period 4540 Transaction ID : B-E-166
City Simi Valley State CA Zip Code 93065-6201	Purpose of Disbursement Reimb. for State Mailer Fees 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:	

SUBTOTAL of Disbursements This Page (optional).....	13020.00
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 15	
	<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)
Rafael Dagnesses for Congress 2014

Full Name (Last, First, Middle Initial) A. Gabriela Murillo		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 3303 Deaver Drive		Amount of Each Disbursement this Period 54.26
City Corona State CA Zip Code 92882-8791	Purpose of Disbursement Reimb. of Expenses Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-168 Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) 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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	54.26
TOTAL This Period (last page this line number only).....	23717.69

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Rafael Dagnesses for Congress 2014** Transaction ID : **SC/10-L1**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
Rafael Dagnesses-Personal Funds Primary
 Mailing Address 65 W Easy Street Suite 102 General
 Other (specify) ▼

City State ZIP Code
 Simi Valley CA 93065-6201

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15000	0	15000

TERMS Date Incurred Date Due Interest Rate Secured:
 M 11 / D 27 / Y 2013 M M / D D / Y None 0.00 % (apr) 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).....	▶	15000.00
TOTALS This Period (last page in this line only).....	▶	15000.00

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 14 OF 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Rafael Dagnesses for Congress 2014

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rafael Dagnesses-Personal Funds		Nature of Debt (Purpose): Advertising: Reimb. for Slate Mailer Fees
Mailing Address 65 W Easy Street Suite 102		
City State	Zip Code	
Simi Valley CA	93065-6201	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT166	
<input type="text" value="9840"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="9840"/>	<input type="text" value="0"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gabriela Murillo		Nature of Debt (Purpose): Administrative/Salary/Overhead: Monthly Consulting Retainer
Mailing Address 3303 Deaver Drive		
City State	Zip Code	
Corona CA	92882-8791	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT167	
<input type="text" value="3500"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="3500"/>	<input type="text" value="0"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gabriela Murillo		Nature of Debt (Purpose): Administrative/Salary/Overhead: Reimb. of Expenses
Mailing Address 3303 Deaver Drive		
City State	Zip Code	
Corona CA	92882-8791	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT168	
<input type="text" value="54.26"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="54.26"/>	<input type="text" value="0"/>

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

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)

Rafael Dagnesses for Congress 2014

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Finance Solutions, Inc.	Nature of Debt (Purpose): Administrative/Salary/Overhead: Accounting & Compliances
Mailing Address 1022 G Street Suite B	
City State Zip Code Sacramento CA 95814-0823	

Outstanding Balance Beginning This Period <input style="width:100%; text-align: center;" type="text" value="0"/>	Transaction ID : SD10-DEBT218
Amount Incurred This Period <input style="width:100%; text-align: center;" type="text" value="1434.93"/>	Payment This Period <input style="width:100%; text-align: center;" type="text" value="0"/>
Outstanding Balance at Close of This Period <input style="width:100%; text-align: center;" type="text" value="1434.93"/>	

B. 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 style="width:100%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/>
Amount Incurred This Period <input style="width:100%;" type="text"/>	Payment This Period <input style="width:100%;" type="text"/>

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 style="width:100%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/>
Amount Incurred This Period <input style="width:100%;" type="text"/>	Payment This Period <input style="width:100%;" type="text"/>

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%; text-align: center;" type="text" value="1434.93"/>
2) TOTALS This Period (last page this line number only) ▶	<input style="width:100%; text-align: center;" type="text" value="1434.93"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input style="width:100%; text-align: center;" type="text" value="15000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%; text-align: center;" type="text" value="16434.93"/>