

# 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

Michael Steger for Congress

ADDRESS (number and street) 350 TOWNSEND ST

Check if different than previously reported. (ACC)

SAN FRANCISCO

CA

94107

2. **FEC IDENTIFICATION NUMBER** ▼

C C00558536

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA

12

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

(a) Quarterly Reports:

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

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

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

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /  through  /  /

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

Type or Print Name of Treasurer Andrea J Ingraham

Signature of Treasurer Andrea J Ingraham

[Electronically Filed]

Date

/  /

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

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Michael Steger for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| <b>6. Net Contributions (other than loans)</b>  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 588.35                  | 31829.74                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 185.00                  | 225.00                             |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                              | 403.35                  | 31604.74                           |
| <b>7. Net Operating Expenditures</b>  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 261.68                  | 31464.14                           |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 5.00                    | 42.00                              |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....  | 256.68                  | 31422.14                           |
| <b>8. Cash on Hand at Close of<br/>Reporting Period (from Line 27).....</b>                                       | 182.60                  |                                    |
| <b>9. Debts and Obligations Owed TO<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b>  | 0.00                    |                                    |
| <b>10. Debts and Obligations Owed BY<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b> | 925.00                  |                                    |

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Michael Steger for Congress**

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

| I. RECEIPTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM:   |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                    |
| (i) Itemized (use Schedule A).....   | 400.00                        | 0.00                               |
| (ii) Unitemized.....   | 185.00                        | 0.00                               |
| (iii) TOTAL of contributions from individuals ▶  | 585.00                        | 25326.39                           |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees (such as PACs).....   | 3.35                          | 6503.35                            |
| (d) The Candidate.....   | 0.00                          | 0.00                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 588.35                        | 31829.74                           |
| 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.) .....                                       |                               |                                    |
|  | 5.00                          | 42.00                              |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.).....  |                               |                                    |
|  | 0.00                          | 0.00                               |
| 16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 593.35                        | 31871.74                           |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 261.68                        | 31464.14                           |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 185.00                        | 225.00                             |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 185.00                        | 225.00                             |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 446.68                        | 31689.14                           |

**III. CASH SUMMARY**

|   |        |
|---|--------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 35.93  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 593.35 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 629.28 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 446.68 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 182.60 |

**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<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**Michael Steger for Congress**

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

Mailing Address 118 AUBURN ST

City SAN RAFAEL State CA Zip Code 94901

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

Name of Employer SELF-EMPLOYED Occupation WINDOW/CARPET CLEANER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2014

**Transaction ID : CASHIN00108759571001**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 118 AUBURN ST

City SAN RAFAEL State CA Zip Code 94901

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

Name of Employer SELF-EMPLOYED Occupation WINDOW/CARPET CLEANER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : CASHIN00108735481001**

Amount of Each Receipt this Period  
200.00

**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).....

400.00

400.00

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

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NAME OF COMMITTEE (In Full)  
**Michael Steger for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KESHA ROGERS FOR US SENATE**

Mailing Address 9100 SOUTHWEST FWY  
# 241

City HOUSTON State TX Zip Code 77074

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1503.35

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2014

**Transaction ID : CASHIN00108759611001**

Amount of Each Receipt this Period  
3.35

**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).....

3.35

3.35

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

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NAME OF COMMITTEE (In Full)  
**Michael Steger for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL STEGER FOR CONGRESS**

Mailing Address 350 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94107

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

Name of Employer [Information Requested] Occupation [Information Requested]

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **30.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 10 / 2014**

**Transaction ID : CSHOUT00101456731001**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **5.00**

RETURN UNUSED PETTY CASH

**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).....

\_\_\_\_\_ **5.00**

\_\_\_\_\_ **5.00**

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |              |  |  |  |
|---|---|--------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 8 OF 12 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |              |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Michael Steger for Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. WELLS FARGO BANK</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 09 / 2014 |
| Mailing Address 490 BRANNAN ST  |  | Amount of Each Disbursement this Period<br>3.00               |
| City<br>SAN FRANCISCO   | State<br>CA  |   |
| Zip Code<br>94107   | Purpose of Disbursement<br>BANK FEE  | Transaction ID : 01014629301013337501                         |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. WELLS FARGO BANK</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 11 / 2014 |
| Mailing Address 490 BRANNAN ST  |  | Amount of Each Disbursement this Period<br>108.97             |
| City<br>SAN FRANCISCO   | State<br>CA  |   |
| Zip Code<br>94107   | Purpose of Disbursement<br>MERCHANT FEES   | Transaction ID : 01014629501013337301                         |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. WELLS FARGO BANK</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 14 / 2014 |
| Mailing Address 490 BRANNAN ST  |  | Amount of Each Disbursement this Period<br>37.50              |
| City<br>SAN FRANCISCO   | State<br>CA  |   |
| Zip Code<br>94107   | Purpose of Disbursement<br>BANK FEE  | Transaction ID : 01014629601013337202                         |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 149.47 |
| <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:<br>(check only one)          | PAGE 9 OF 12                       |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Michael Steger for Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. WELLS FARGO BANK</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 08 / 2014                                   |
| Mailing Address 490 BRANNAN ST   |   | Amount of Each Disbursement this Period<br>3.00<br><b>Transaction ID : 01014629901013337701</b> |
| City<br>SAN FRANCISCO  | State<br>CA   |   |
| Zip Code<br>94107  | Purpose of Disbursement<br>BANK FEE   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. WELLS FARGO BANK</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 12 / 2014                                    |
| Mailing Address 490 BRANNAN ST   |   | Amount of Each Disbursement this Period<br>53.60<br><b>Transaction ID : 01014629801013337101</b> |
| City<br>SAN FRANCISCO  | State<br>CA   |  |
| Zip Code<br>94107  | Purpose of Disbursement<br>MERCHANT FEES  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. WELLS FARGO BANK</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 09 / 2014                                   |
| Mailing Address 490 BRANNAN ST   |   | Amount of Each Disbursement this Period<br>3.00<br><b>Transaction ID : 01014733401013452401</b> |
| City<br>SAN FRANCISCO  | State<br>CA   |   |
| Zip Code<br>94107  | Purpose of Disbursement<br>BANK FEE   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 59.60 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 10 OF 12                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Michael Steger for Congress**

|  |                                       |  |
|--|---------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. WELLS FARGO BANK</b>  |                                       | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>09 / 30 / 2014</b> |
| Mailing Address <b>490 BRANNAN ST</b>  |                                       | Amount of Each Disbursement this Period<br><b>14.00</b>              |
| City <b>SAN FRANCISCO</b>  | State <b>CA</b> Zip Code <b>94107</b> |  |
| Purpose of Disbursement<br><b>BANK FEE</b>   | Candidate Name                        | <b>Transaction ID : 01014733501013452501</b>                         |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                                       |  |
| State: District:   | Category/Type                         |  |

|  |                |   |
|--|----------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>   |                | Date of Disbursement<br>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 |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                |   |
| State: District:   | Category/Type  |   |

|  |                |   |
|--|----------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>   |                | Date of Disbursement<br>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 |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |                |   |
| State: District:   | Category/Type  |   |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>14.00</b>  |
| <b>TOTAL</b> This Period (last page this line number only)..... | <b>223.07</b> |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 11 OF 12 |
|   | <input type="checkbox"/> 17<br><input checked="" type="checkbox"/> 20a<br><input type="checkbox"/> 18<br><input type="checkbox"/> 20b<br><input type="checkbox"/> 19a<br><input type="checkbox"/> 20c<br><input type="checkbox"/> 19b<br><input type="checkbox"/> 21 |               |

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NAME OF COMMITTEE (In Full)  
**Michael Steger for Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANDREA INGRAHAM</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 23 / 2014                                    |
| Mailing Address 48 5TH AVE   |   | Amount of Each Disbursement this Period<br>45.00<br><b>Transaction ID : CashIn00108759631001</b> |
| City<br>OAKLAND  | State<br>CA   |  |
| Zip Code<br>94606  | Purpose of Disbursement   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. MICHAEL STEGER</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 23 / 2014                                     |
| Mailing Address 350 TOWNSEND ST, #321  |   | Amount of Each Disbursement this Period<br>140.00<br><b>Transaction ID : CashIn00108759621001</b> |
| City<br>SAN FRANCISCO  | State<br>CA   |   |
| Zip Code<br>94107  | Purpose of Disbursement   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address  |   | Amount of Each Disbursement this Period     |
| City   | State   |   |
| Zip Code   | Purpose of Disbursement   | Category/<br>Type                           |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 185.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 185.00 |

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

NAME OF COMMITTEE (In Full)

**Michael Steger for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**LAROUCHE POLITICAL ACTION COMMITTEE**

Mailing Address P.O. BOX 6157

City State Zip Code  
 LEESBURG VA 20178-6157

Nature of Debt (Purpose):  
 OFFICE USAGE

|   |  |   |
|---|--|---|
| Outstanding Balance Beginning This Period | <b>Transaction ID : INV6340010132656</b> |   |
| 925.00                                    |  |   |
| Amount Incurred This Period               | Payment This Period                      | Outstanding Balance at Close of This Period |
| 0.00                                      | 0.00                                     | 925.00                                      |

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

|   |                     |   |
|---|---------------------|---|
| Outstanding Balance Beginning This Period |                     |   |
| Amount Incurred This Period               | Payment This Period | Outstanding Balance at Close of This Period |

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

|   |                     |   |
|---|---------------------|---|
| Outstanding Balance Beginning This Period |                     |   |
| Amount Incurred This Period               | Payment This Period | Outstanding Balance at Close of This Period |

|  |        |
|--|--------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional) .....                                       | 925.00 |
| 2) <b>TOTALS</b> This Period (last page this line number only) .....                             | 925.00 |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                          | 0.00   |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | 925.00 |