4031180562

FEC FORM 3

Use

Only

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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FEC FORM 3

(Revised 02/2003)

		····									
NAME OF COMMITTEE (in full)	TYPE OR PRINT	` ▼		ample: If ty er the lines		type	12	2FE 4M 5	MAII	CENTER	
LAMAR STERNAD FOR	CONGRESS		L_1_1_						1_1_	111	
<u> </u>	<u> </u>							111	1 1		لبيا
ADDRESS (number and street)	19790 SW	101	AVEN	JE _{I I I}							
Check if different											لــــا
than previously reported. (ACC)	CUTLER I	BAY	<u> </u>	<u> </u>			F	L L	331	57	8607
2. FEC IDENTIFICATION N	JMBER ▼		CITY				STAT	E A		ZIP CODE	▲
C 00505529		3. IS RE	THIS PORT	E 35	N)	OR		AMEND (A)	DED	FL FL	DISTRICT
4. TYPE OF REPORT (Ch	pose One)	(b) 12-	Day PPE	-Election F)enort	for the			_	"	<u> </u>
(a) Quarterly Reports:		(b) 12°	Day FRE			ioi tile.					
April 15 Quarterly F	Report (Q1)		L	Primary (12P)		L	General (1	12G)	Rur	off (12R)
				Convention	on (12	C)		Special (1	2S)		
July 15 Quarterly F				M ^{s)} M	7	D D	/ [Y	Y * Y * Y	1	in the	
October 15 Quarter	ly Report (Q3)	Ele	ection on	L.			Land	mada and an and an		State of	
X January 31 Year-Er	d Report (YE)	(c) 30-	Day POS	T-Election	Repo	rt for the	e:				•
				General (30G)			Runoff (30	OR)	Spe	cial (30S)
Termination Report	(TER)	Ele	ection on	M M	.	D D	/ [v	7.77		in the State of	
5. Covering Period) ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Ž 013	3 1	throug	gh)	12	M /	31° ′	20	1 3*,**	
I certify that I have examined th	is Report and to	the best	of my kr	nowledge/a	nd be	lief it is	true, d	correct and	d com	plete.	
Type or Print Name of Treasure	JUSTIN	LAMAR	STEF	NAD							
Signature of Treasurer			***************************************		<u>)</u>	VV.,490*********	Date	mo"a ^m	′	¹ 2g / ¹ 2	0 [°] 1 [°] 4 [°]
NOTE: Submission of false, errone	eous, or incomple	te informa	ation may	subject the	perso	n signing	g this f	Report to ti	he per	nalties of 2 U.S	S.C. §437g.
Office					<i>-</i>		1				

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SUMMARY PAGE

of Receipts and Disbursements

Page 2

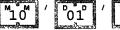
FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:



2013

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))	8.70	34.80
	(b)	Total Contribution Refunds (from Line 20(d))		
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	8.70	34.80
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	8.70	34.80
	(b)	Total Offsets to Operating Expenditures (from Line 14)	and the second	
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	8.70	34.80
8.		sh on Hand at Close of porting Period (from Line 27)	0.00	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)		
10.	the	ots and Obligations Owed BY Committee (Itemize all on needule C and/or Schedule D)	27.85	

For further information contact:

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

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

FEC Form 3 (Revised 12/2003)

DETAILED SUMMARY PAGE

of Receipts

Page 3

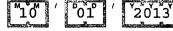
Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

403118056

From:





^v20^v13^v

	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)		
	(iii) Unitemized		
	(b) Political Party Committees		
	(d) The Candidate	8.70	34.80
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13.	LOANS: (a) Made or Guaranteed by the Candidate	and the second s	and the second
	(b) All Other Loans		
14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15.	OTHER RECEIPTS (Dividends, Interest, etc.)		
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	8.70	34.80

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

nts Page 4

COLUMN A COLUMN B II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 8.70 34.80 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate..... (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other Than Political Committees (b) Political Party Committees..... (c) Other Political Committees (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 8.70 34.80 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 0.00 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 8.70 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 8.70 25. SUBTOTAL (add Line 23 and Line 24)..... 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 0.00 (subtract Line 26 from Line 25).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE	PAGE	(5	OF	8	
(check only	y one)					
X 11a	11b	11c		110	d _	
1 1.0	المالا	· I		مدا		14-

			Detailed Sur	mmary Page		12		13a	13b	14	1	5
An or	y information copied from such Reports and St for commercial purpodes, other than using the	atements m	ay not be sold address of any	or used by any p political cammitte	ersor	for the	pur	pose o	f soliciti	ng contr	ibutions	
>	NAME OF COMMITTEE (In Full)											
	LAMAR STERNAD FOR CONGRES	SS										
۹.	Full Name (Last, First, Middle Initial) STERNAD, JUSTIN L. Mailing Address 19790 SW 101 AVENUE City	State	Zip Code			Date of	Rec	eipt 15		2013	• Y	
	CUTLER BAY	FL	=	7-8607	-							
	FEC ID number of contributing federal political committee.	C				Amount	t of E		eceipt th	-	d .70	
	Name of Employer CAMBEAN HOSPITALITY Receipt For: OPEN COMMITTEE 2012 CYCLE Primary General X Other (specify)	Election Cy	AUDITOR ycle-to-Date	34.80	CHECK AND A COLUMN							
В.	Full Name (Last, First, Middle Initial) Mailing Address City	State	Zip Code			Date of	f Rec	ceipt				
	FEC ID number of contributing federal political committee. Name of Employer	C Cocupation		and the second s					-	his Perio		
	Receipt For: Primary General Other (specify)		ycle-to-Date									
	Full Name (Last, First, Middle Initial)					Date of	Rec	eint				
C.	Mailing Address City	State	Zip Code			M × M	/] / [Ÿ			
	FEC ID number of contributing federal political committee.	C							•	nis Perio		
	Name of Employer	Occupation	1					\$	<u> </u>	<u> </u>	\$ 12.55	
	Receipt For: Primary General Other (specify)		ycle-to-Date									
s	UBTOTAL of Receipts This Page (optional)				•)				
T	OTAL This Period (last page this line number o	nly)					e	la de la composição de la La composição de la compo	¥1	8	.70	

City

Purpose of Disbursement

House

Senate

House

Senate

District:

President

District: Full Name (Last, First, Middle Initial)

President

Candidate Name

Office Sought:

Mailing Address

Candidate Name

Office Sought:

State:

Purpose of Disbursement

State:

City

C.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 8 (check only one) X 17
Any information copied from such Reports and Statements m or for nommercial purposes, other than using the name and a NAME OF COMMITTEE (In Full).		
LAMAR STERNAD FOR CONGRESS Full Name (Last, First, Middle Initial) A. USPS Mailing Address 10360 SW 186 STREET		Date of Disbursement
City State MIAMI FL Purpose of Disbursement POSTAGE Candidate Name JUSTIN LAMAR STERNAD	Zip Code 33197 001 Category Type OPEN COMMITTEE 2012 CYCLE General pecify)	Amount of Each Disbursement this Period 8.70
Full Name (Last, First, Middle Initial) B. Mailing Address		Date of Disbursement

Zip Code

General

General

Category/ Type

Category/ Type

State

Disbursement For:

State

Disbursement For:

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

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

Primary

Other (specify)

Primary

Other (specify)

Zip Code

 8.70
FEC Schedule B (Form 3) (Revised 02/2009)

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period

Date of Disbursement

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

	i
X	13a
	13b

7 OF 8

NAME OF COMMITTEE (In Full) LAMAR STERNAD FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle mitial) [PERSONAL STERNAD, JUSTIN L. Mailing Address 19790 SW 101 AVE. City State ZIP Code CUTLER BAY FL 33157	X Primary General Other (specify) ▼
LOAN SOURCE Full Name (Last, First, Middle mitial) [PERSONAL STERNAD, JUSTIN L. Mailing Address 19790 SW 101 AVE. City State ZIP Code	X Primary General Other (specify) ▼
STERNAD, JUSTIN L. Mailing Address 19790 SW 101 AVE. City State ZIP Code	X Primary General Other (specify) ▼
Mailing Address 19790 SW 101 AVE. City State ZIP Code	General Other (specify) ▼
19790 SW 101 AVE. City State ZIP Code	}
1 '	
	, 5557
Original Amount of Loan Cumulative Payment To Da 3.60	
04 / 12 / 2012 " " ON / DE	Interest Rate Secured: (MAND) 0.00 % (apr) X 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) TOTALS This Period (last page in this line only)	

SCHEDULE C (FEC Form 3) LC

PAGE

8 OF 8

LOANS	for each category of the Detailed Summary Page Separate scriedule(s) FOR LINE NUMBER: (check only one) X 13a 13b
NAME OF COMMITTEE (In Full)	
LAMAR STERNAD FOR CONGRESS	
LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONA STERNAD, JUSTIN L.	AL FUNDS] Election: 2012 X Primary General
Mailing Address 19790 SW 101 AVE.	Other (specify) ▼
City State ZIP Co CUTLER BAY FL 331	ode 57-8607
Original Amount of Loan Cumulative Payment To	0.75
Beautive of Considered Considered Considered Considered Considered Considered	Interest Rate Secured: DEMAND 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	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)	
TOTALS This Period (last page in this line only)	2 7.85

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

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DATE PREPARED

(8/2013)

PREPARER