

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
Committee to Elect Tim Sheridan to Congress

ADDRESS (number and street) P.O. Box 277
 Check if different than previously reported. (ACC) Sun City CA 92586

2. **FEC IDENTIFICATION NUMBER** ▼ C C00546580 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
CA 42

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 Yvette Marie Piacsek

Signature of Treasurer Yvette Marie Piacsek *[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.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Committee to Elect Tim Sheridan to Congress

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))....	17478.83	39184.90
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	17478.83	39184.90
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5047.50	23229.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	5047.50	23229.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	20222.03	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	4265.13	

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

Committee to Elect Tim Sheridan to Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2393.00	6533.00
(ii) Unitemized.....	2513.00	8956.88
(iii) TOTAL of contributions from individuals ▶	4906.00	15489.88
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	12500.00	12700.00
(d) The Candidate.....	72.83	10995.02
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	17478.83	39184.90
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	4265.13
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	4265.13
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	1.92
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	17478.83	43451.95

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5047.50	23229.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	5047.50	23229.92

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7790.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	17478.83
25. SUBTOTAL (add Line 23 and Line 24).....	25269.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5047.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	20222.03

**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 24
	<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)
Committee to Elect Tim Sheridan to Congress

A. Full Name (Last, First, Middle Initial)
Gloria Bachmann

Mailing Address 28760 Via Del Sol

City Murrieta State CA Zip Code 92563

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

Name of Employer Retired Occupation none

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.4818

Amount of Each Receipt this Period
 Contribution 250.00

B. Full Name (Last, First, Middle Initial)
Catherine Bishop

Mailing Address 6215 Hillegass

City Oakland State CA Zip Code 94618

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

Name of Employer self Occupation attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4811

Amount of Each Receipt this Period
 Contribution 500.00

C. Full Name (Last, First, Middle Initial)
Anja Carde

Mailing Address 6605 Hawarden Drive

City Riverside State CA Zip Code 92506

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

Name of Employer Not employed Occupation none

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : SA11AI.4708

Amount of Each Receipt this Period
 Contribution 50.00

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

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

800.00

**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 24
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Tim Sheridan to Congress

A. Full Name (Last, First, Middle Initial)
Bonita Connoley

Mailing Address 40013 Via Tiama

City Murrieta State CA Zip Code 92562

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **260.00**

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

Transaction ID : SA11AI.4763

Amount of Each Receipt this Period
10.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Terry W Fox

Mailing Address 21106 Scenic Ridge Dr

City Lake Elsinore State CA Zip Code 92532

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

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

Transaction ID : SA11AI.4758

Amount of Each Receipt this Period
100.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Laurel Groshong

Mailing Address 23971 Via Pamilla

City Murrieta State CA Zip Code 92562

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **460.00**

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

Transaction ID : SA11AI.4782

Amount of Each Receipt this Period
10.00
 Contribution

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

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

120.00

**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 24
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Tim Sheridan to Congress

A. Full Name (Last, First, Middle Initial)
Diana Hansen

Mailing Address 31809 St. Pierre Lane

City Lake Elsinore State CA Zip Code 92530

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

Name of Employer Kaiser Permanente Occupation RN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.4692

Amount of Each Receipt this Period
 Contribution 50.00

B. Full Name (Last, First, Middle Initial)
Ruth A Harrell

Mailing Address 31750 Machado St. Spc. 1

City Lake Elsinore State CA Zip Code 92530

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11AI.4739

Amount of Each Receipt this Period
 Contribution 100.00

C. Full Name (Last, First, Middle Initial)
Ruth A Harrell

Mailing Address 31750 Machado St. Spc. 1

City Lake Elsinore State CA Zip Code 92530

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

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

Transaction ID : SA11AI.4786

Amount of Each Receipt this Period
 Contribution 100.00

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

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

250.00

**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 24
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Tim Sheridan to Congress

A. Full Name (Last, First, Middle Initial)
Ruth A Harrell

Mailing Address 31750 Machado St. Spc. 1

City Lake Elsinore State CA Zip Code 92530

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
420.00

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

Transaction ID : SA11AI.4785

Amount of Each Receipt this Period
 Contribution 20.00

B. Full Name (Last, First, Middle Initial)
Lois Hochenauer-Fox

Mailing Address 21106 Scenic Ridge Dr

City Lake Elsinore State CA Zip Code 92532

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

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

Transaction ID : SA11AI.4815

Amount of Each Receipt this Period
 Contribution 100.00

C. Full Name (Last, First, Middle Initial)
Lois Hochenauer-Fox

Mailing Address 21106 Scenic Ridge Dr

City Lake Elsinore State CA Zip Code 92532

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
282.00

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

Transaction ID : SA11AI.4691

Amount of Each Receipt this Period
 Contribution 42.00

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

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

162.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 24
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Tim Sheridan to Congress

A. Full Name (Last, First, Middle Initial)
John W Kopp

Mailing Address 7843 Whippet Street

City Eastvale State CA Zip Code 92880

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1140.00**

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

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period
100.00

Contribution

B. Full Name (Last, First, Middle Initial)
John W Kopp

Mailing Address 7843 Whippet Street

City Eastvale State CA Zip Code 92880

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1182.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11AI.4797

Amount of Each Receipt this Period
42.00

Contribution

C. Full Name (Last, First, Middle Initial)
Cindy Petersen

Mailing Address 15156 Chaumont St.

City Lake Elsinore State CA Zip Code 92530

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

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

Transaction ID : SA11AI.4702

Amount of Each Receipt this Period
200.00

Contribution

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

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

342.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 24
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Tim Sheridan to Congress

A. Full Name (Last, First, Middle Initial)
Cindy Petersen

Mailing Address 15156 Chaumont St.

City Lake Elsinore State CA Zip Code 92530

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **315.00**

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

Transaction ID : SA11AI.4697

Amount of Each Receipt this Period
 Contribution **15.00**

B. Full Name (Last, First, Middle Initial)
Ira Robinson

Mailing Address 31537 Royal Oaks Dr.

City Temecula State CA Zip Code 92591

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : SA11AI.4729

Amount of Each Receipt this Period
 Contribution **100.00**

C. Full Name (Last, First, Middle Initial)
Ira Robinson

Mailing Address 31537 Royal Oaks Dr.

City Temecula State CA Zip Code 92591

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **620.00**

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

Transaction ID : SA11AI.4745

Amount of Each Receipt this Period
 Contribution **20.00**

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

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

135.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 24
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Tim Sheridan to Congress

A. Full Name (Last, First, Middle Initial)
Robert Unetic

Mailing Address 2309 Westwood Ave.

City Santa Ana State CA Zip Code 92706

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

Name of Employer Attorney Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
532.88

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

Transaction ID : SA11AI.4735

Amount of Each Receipt this Period
334.00

In-kind - Yard Signs

B. Full Name (Last, First, Middle Initial)
Gerald A Williams

Mailing Address 6175 Mercer St

City San Diego State CA Zip Code 92122

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

Name of Employer Retired Occupation none

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11AI.4737

Amount of Each Receipt this Period
250.00

Contribution

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).....

584.00

2393.00

**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 12 OF 24
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Tim Sheridan to Congress

A. Full Name (Last, First, Middle Initial)
DRIVE Committee

Mailing Address 25 Louisiana Ave NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00032979**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11C.4751

Amount of Each Receipt this Period
 Contribution 5000.00

B. Full Name (Last, First, Middle Initial)
SHEET METAL WORKER'S INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE PAL

Mailing Address 1750 NEW YORK AVE NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C70001136**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11C.4749

Amount of Each Receipt this Period
 Contribution 2500.00

C. Full Name (Last, First, Middle Initial)
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION

Mailing Address 1775 K STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C70003645**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11C.4792

Amount of Each Receipt this Period
 Contribution 5000.00

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

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

12500.00

12500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 24
<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)
Committee to Elect Tim Sheridan to Congress

A. Full Name (Last, First, Middle Initial)
Tim Sheridan

Mailing Address 30458 Misty Creek Drive

City Menifee State CA Zip Code 92584

FEC ID number of contributing federal political committee. **C H4CA42086**

Name of Employer NTEU Occupation National Field Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1525.98

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

Transaction ID : SA11D.4889

Amount of Each Receipt this Period
19.40

In-kind - Stamps

B. Full Name (Last, First, Middle Initial)
Tim Sheridan

Mailing Address 30458 Misty Creek Drive

City Menifee State CA Zip Code 92584

FEC ID number of contributing federal political committee. **C H4CA42086**

Name of Employer NTEU Occupation National Field Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1529.82

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

Transaction ID : SA11D.4891

Amount of Each Receipt this Period
3.84

In-kind - Index Cards

C. Full Name (Last, First, Middle Initial)
Tim Sheridan

Mailing Address 30458 Misty Creek Drive

City Menifee State CA Zip Code 92584

FEC ID number of contributing federal political committee. **C H4CA42086**

Name of Employer NTEU Occupation National Field Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1546.02

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

Transaction ID : SA11D.4893

Amount of Each Receipt this Period
16.20

In-kind - Thank You Cards

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

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

39.44

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 24
	<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)
Committee to Elect Tim Sheridan to Congress

A. Full Name (Last, First, Middle Initial)
Tim Sheridan

Mailing Address 30458 Misty Creek Drive

City Menifee State CA Zip Code 92584

FEC ID number of contributing federal political committee. **C H4CA42086**

Name of Employer NTEU Occupation National Field Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1559.81

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 09 / 2014

Transaction ID : SA11D.4895

Amount of Each Receipt this Period
13.79

In-kind - Thank You Cards

B. Full Name (Last, First, Middle Initial)
Tim Sheridan

Mailing Address 30458 Misty Creek Drive

City Menifee State CA Zip Code 92584

FEC ID number of contributing federal political committee. **C H4CA42086**

Name of Employer NTEU Occupation National Field Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1579.41

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

Transaction ID : SA11D.4897

Amount of Each Receipt this Period
19.60

In-kind - Stamps

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).....

33.39

72.83

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 24			
	<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)
Committee to Elect Tim Sheridan to Congress

Full Name (Last, First, Middle Initial) A. A to Z Printing		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 4330 Van Buren Blvd		Amount of Each Disbursement this Period 122.04 Transaction ID : SB17.4659
City Riverside	State CA	
Purpose of Disbursement Printing Services	Category/ Type 004	
Candidate Name Committee to Elect Tim Sheridan to Congress	Office Sought: <input checked="" 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: CA	District: 42	

Full Name (Last, First, Middle Initial) B. A to Z Printing		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 4330 Van Buren Blvd		Amount of Each Disbursement this Period 54.00 Transaction ID : SB17.4660
City Riverside	State CA	
Purpose of Disbursement Printing Services	Category/ Type 006	
Candidate Name Committee to Elect Tim Sheridan to Congress	Office Sought: <input checked="" 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: CA	District: 42	

Full Name (Last, First, Middle Initial) C. A to Z Printing		Date of Disbursement MM / DD / YYYY 04 / 12 / 2014
Mailing Address 4330 Van Buren Blvd		Amount of Each Disbursement this Period 473.05 Transaction ID : SB17.4654
City Riverside	State CA	
Purpose of Disbursement Printing expenses	Category/ Type 003	
Candidate Name Committee to Elect Tim Sheridan to Congress	Office Sought: <input checked="" 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: CA	District: 42	

SUBTOTAL of Disbursements This Page (optional).....	649.09
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 16 OF 24			
	<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)
Committee to Elect Tim Sheridan to Congress

A. A to Z Printing

Full Name (Last, First, Middle Initial)
Mailing Address 4330 Van Buren Blvd

City Riverside State CA Zip Code 92502

Purpose of Disbursement
Printing Services

Candidate Name
Committee to Elect Tim Sheridan to Congress

Office Sought: House Senate President
State: CA District: 42

Disbursement For: 2014
 Primary General
 Other (specify)

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

Amount of Each Disbursement this Period
54.01

Transaction ID : SB17.4664

Category/Type
006

B. A to Z Printing

Full Name (Last, First, Middle Initial)
Mailing Address 4330 Van Buren Blvd

City Riverside State CA Zip Code 92502

Purpose of Disbursement
Printing Services

Candidate Name
Committee to Elect Tim Sheridan to Congress

Office Sought: House Senate President
State: CA District: 42

Disbursement For: 2014
 Primary General
 Other (specify)

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

Amount of Each Disbursement this Period
2740.00

Transaction ID : SB17.4665

Category/Type
006

c. Gail Ferrell

Full Name (Last, First, Middle Initial)
Mailing Address 40036 Via Graziana

City Murrieta State CA Zip Code 92562

Purpose of Disbursement
Reimbursement TNBC S. CA Union Luncheon

Candidate Name
Committee to Elect Tim Sheridan to Congress

Office Sought: House Senate President
State: CA District: 42

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement
M M / D D / Y Y Y Y
04 / 12 / 2014

Amount of Each Disbursement this Period
85.00

Transaction ID : SB17.4661

Category/Type
007

SUBTOTAL of Disbursements This Page (optional)..... 2879.01

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 17 OF 24			
	<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)
Committee to Elect Tim Sheridan to Congress

Full Name (Last, First, Middle Initial) A. Anna Meyer		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 8783 Cuyamaca St		Amount of Each Disbursement this Period 128.00 Transaction ID : SB17.4657
City Corona State CA Zip Code 92883	Purpose of Disbursement Reimbursement for Website Invoices Category/Type 001	
Candidate Name Committee to Elect Tim Sheridan to Congress	Office Sought: <input checked="" 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: CA District: 42		

Full Name (Last, First, Middle Initial) B. Murrieta Fire Dept.		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 41825 Juniper St		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.4655
City Murrieta State CA Zip Code 92562	Purpose of Disbursement Space at BBQ event Category/Type 007	
Candidate Name Committee to Elect Tim Sheridan to Congress	Office Sought: <input checked="" 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: CA District: 42		

Full Name (Last, First, Middle Initial) c. Tim Sheridan		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 30458 Misty Creek Drive		Amount of Each Disbursement this Period 19.40 Transaction ID : SB17.4890
City Menifee State CA Zip Code 92584	Purpose of Disbursement In-kind - Stamps Category/Type	
Candidate Name	Office Sought: <input checked="" 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: CA District: 42		

SUBTOTAL of Disbursements This Page (optional).....	177.40
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 18 OF 24			
	<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)
Committee to Elect Tim Sheridan to Congress

Full Name (Last, First, Middle Initial) A. Tim Sheridan		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 30458 Misty Creek Drive		Amount of Each Disbursement this Period 3.84 Transaction ID : SB17.4892
City Menifee	State CA	
Purpose of Disbursement In-kind - Index Cards	Category/ Type	
Candidate Name		
Office Sought: <input checked="" 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: CA District: 42		

Full Name (Last, First, Middle Initial) B. Tim Sheridan		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 30458 Misty Creek Drive		Amount of Each Disbursement this Period 16.20 Transaction ID : SB17.4894
City Menifee	State CA	
Purpose of Disbursement In-kind - Thank You Cards	Category/ Type	
Candidate Name		
Office Sought: <input checked="" 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: CA District: 42		

Full Name (Last, First, Middle Initial) c. Tim Sheridan		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 30458 Misty Creek Drive		Amount of Each Disbursement this Period 13.79 Transaction ID : SB17.4896
City Menifee	State CA	
Purpose of Disbursement In-kind - Thank You Cards	Category/ Type	
Candidate Name		
Office Sought: <input checked="" 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: CA District: 42		

SUBTOTAL of Disbursements This Page (optional).....	33.83
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 19 OF 24			
	<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)
Committee to Elect Tim Sheridan to Congress

Full Name (Last, First, Middle Initial) A. Tim Sheridan		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 30458 Misty Creek Drive		Amount of Each Disbursement this Period 19.60
City Menifee	State CA	
Zip Code 92584	Purpose of Disbursement In-kind - Stamps	Transaction ID : SB17.4898
Candidate Name	Category/ Type	
Office Sought: <input checked="" 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: CA	District: 42	

Full Name (Last, First, Middle Initial) B. Luisa A Tassan		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 1145 Via Pintada		Amount of Each Disbursement this Period 35.00
City Riverside	State CA	
Zip Code 92507	Purpose of Disbursement Reimbursement for voter list	Transaction ID : SB17.4662
Candidate Name Committee to Elect Tim Sheridan to Congress	Category/ Type 006	
Office Sought: <input checked="" 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: CA	District: 42	

Full Name (Last, First, Middle Initial) c. Robert Unetic		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 2309 Westwood Ave.		Amount of Each Disbursement this Period 334.00
City Santa Ana	State CA	
Zip Code 92706	Purpose of Disbursement In-kind - Yard Signs	Transaction ID : SB17.4736
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	388.60
TOTAL This Period (last page this line number only).....	4127.93

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Committee to Elect Tim Sheridan to Congress

Transaction ID : **SC/10.4210**

LOAN SOURCE Full Name (Last, First, Middle Initial)

TIMOTHY J. SHERIDAN

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 277

City State ZIP Code
SUN CITY CA 92586

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
525.00 0.00 525.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 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)..... ▶ 525.00

TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4209

Committee to Elect Tim Sheridan to Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

TIMOTHY J. SHERIDAN

Primary

General

Other (specify) ▼

Mailing Address

PO BOX 277

City

State

ZIP Code

SUN CITY

CA

92586

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

435.13

0.00

435.13

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 09 /

D 29 /

Y 2013 Y

M /

D /

Y none Y

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).....

435.13

TOTALS This Period (last page in this line only).....

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

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

NAME OF COMMITTEE (In Full) **Committee to Elect Tim Sheridan to Congress** Transaction ID : **SC/10.4638**

LOAN SOURCE Full Name (Last, First, Middle Initial) TIMOTHY J. SHERIDAN	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 277		

City	State	ZIP Code
SUN CITY	CA	92586

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2800.00	0.00	2800.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 03 / Y 2014 Y	M M / D D / Y none Y Y	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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	<input type="text" value="2800.00"/>
TOTALS This Period (last page in this line only).....	<input type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : **SC/10.4642**

Committee to Elect Tim Sheridan to Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

TIMOTHY J. SHERIDAN

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 277

City State ZIP Code
SUN CITY CA 92586

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
435.00 0.00 435.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 24 / Y 2014 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)..... ▶ 435.00
TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Elect Tim Sheridan to Congress** Transaction ID : **SC/10.4643**

LOAN SOURCE Full Name (Last, First, Middle Initial) TIMOTHY J. SHERIDAN	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 277		

City	State	ZIP Code
SUN CITY	CA	92586

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
70.00	0.00	70.00

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 25 / Y 2014 Y	M M / D D / Y none Y Y			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: []

SUBTOTALS This Period This Page (optional).....	70.00
TOTALS This Period (last page in this line only).....	4265.13
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	