

Date: JULY 15, 2015

RECEIVED
FEC MAIL CENTER

To: FEDERAL ELECTION COMMISSION
999 E STREET, NW
WASHINGTON, DC 20463

JUL 20 PM 12:30

RE: SANYAL FOR CONGRESS
FEC ID NO: C00561340
JULY 15 QUARTERLY REPORT (Q2)
COVERING PERIOD: 04-01-2015 Through 06-30-2015

Dear Sir/Madam:

ENCLOSED IS OUR JULY 15 QUARTERLY
REPORT (Q2). THERE HAS BEEN NO
ACTIVITY SINCE THE LAST QUARTERLY
REPORT.

SINCERELY,

Arumava Sanyal

SANYAL FOR CONGRESS
7401 GLENHARDEN DRIVE
RAELGH, NC 27613-1513

ENCL.

JULY 15 QUARTERLY REPORT (Q2)

UNCLASSIFIED//NO FORN DISSEM

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED FEC MAIL CENTER 2015 JUL 20 PM 12:30 Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

SANYAL FOR CONGRESS

ADDRESS (number and street)

7401 GLENHARDEN DRIVE

Check if different than previously reported. (ACC)

RALEIGH

NC

27613-1513

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00561340

3. IS THIS REPORT

NEW (N) [X]

OR

AMENDED (A) []

AMENDED (A)

NC

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1) []

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2) [X]

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3) []

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE) []

January 31 Year-End Report (YE)

Termination Report (TER) []

Termination Report (TER)

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

Primary (12P) []

Primary (12P)

General (12G) []

General (12G)

Runoff (12R) []

Runoff (12R)

Convention (12C) []

Convention (12C)

Special (12S) []

Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

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

General (30G) []

General (30G)

Runoff (30R) []

Runoff (30R)

Special (30S) []

Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

5. Covering Period

MM / DD / YYYY 04 / 01 / 2015

MM / DD / YYYY 01 / 01 / 2015

MM / DD / YYYY 06 / 30 / 2015

through

MM / DD / YYYY 06 / 30 / 2015

MM / DD / YYYY 07 / 15 / 2015

MM / DD / YYYY 07 / 15 / 2015

MM / DD / YYYY 07 / 15 / 2015

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

ARUNAVA SANYAL

Signature of Treasurer

Arunava Sanyal

Date

MM / DD / YYYY 07 / 15 / 2015

MM / DD / YYYY 07 / 15 / 2015

MM / DD / YYYY 07 / 15 / 2015

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

SANYAL FOR CONGRESS

Report Covering the Period:

From:

04 / 01 / 2013

To:

06 / 30 / 2015

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

For further information contact:

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

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

NOV 10 10 00 AM '13

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

SANYAL FOR CONGRESS

Report Covering the Period: From:

| | | |
|----|----|------|
| MM | DD | YYYY |
| 04 | 01 | 2015 |

 To:

| | | |
|----|----|------|
| MM | DD | YYYY |
| 06 | 30 | 2015 |

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).....
 - (ii) Unitemized.....
 - (iii) TOTAL of contributions from individuals ▶
- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) The Candidate.....
- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

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12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

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|--|
| |
|--|

13. LOANS:

- (a) Made or Guaranteed by the Candidate.....
- (b) All Other Loans.....
- (c) TOTAL LOANS (add Lines 13(a) and (b)).....

| |
|--|
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| |

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14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

| |
|--|
| |
|--|

| |
|--|
| |
|--|

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

| |
|--|
| |
|--|

| |
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|--|

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

| |
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| |
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|--|
| |
|--|

ACCOUNTING INFORMATION

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

| | | |
|---|----------------------|----------------------|
| 17. OPERATING EXPENDITURES..... | <input type="text"/> | <input type="text"/> |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | <input type="text"/> | <input type="text"/> |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | <input type="text"/> | <input type="text"/> |
| (b) Of All Other Loans..... | <input type="text"/> | <input type="text"/> |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | <input type="text"/> | <input type="text"/> |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | <input type="text"/> | <input type="text"/> |
| (b) Political Party Committees..... | <input type="text"/> | <input type="text"/> |
| (c) Other Political Committees (such as PACs) | <input type="text"/> | <input type="text"/> |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | <input type="text"/> | <input type="text"/> |
| 21. OTHER DISBURSEMENTS..... | <input type="text"/> | <input type="text"/> |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | <input type="text"/> | <input type="text"/> |

III. CASH SUMMARY

| | |
|--|----------------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | <input type="text"/> |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | <input type="text"/> |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | <input type="text"/> |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | <input type="text"/> |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | <input type="text"/> |

2025 RELEASE UNDER E.O. 14176

**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 OF | |
| | <input type="checkbox"/> 1,1a <input type="checkbox"/> 12 | <input type="checkbox"/> 11b <input type="checkbox"/> 13a | <input type="checkbox"/> 11c <input type="checkbox"/> 13b | <input type="checkbox"/> 11d <input type="checkbox"/> 14 |

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)
SANYAL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. 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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. 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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. 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

Amount of Each Receipt this Period

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

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

2008-11-03 10:00:00 AM

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE OF
FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
SANYAL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)
Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
City State ZIP Code

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

TERMS
Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y % (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: <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)
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.

2011-01-01 10:00:00 AM

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
 Information found on
 Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

| | |
|---|---|
| NAME OF COMMITTEE (In Full) SANYAL FOR CONGRESS | FEC IDENTIFICATION NUMBER C00561340 |
|---|---|

| | | |
|---|------------------------------|--------------------------|
| LENDING INSTITUTION (LENDER) Full Name | Amount of Loan | Interest Rate (APR) % |
| Mailing Address | Date Incurred or Established | |
| City State Zip Code | Date Due | |

A. Has loan been restructured? No Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: What is the value of this collateral?
 Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account:
 Address:
 City, State, Zip:
 Date account established:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER
 Typed Name
 Signature
 DATE

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
 I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
 III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

| | | |
|--|-------|------|
| AUTHORIZED REPRESENTATIVE Typed Name Signature | Title | DATE |
|--|-------|------|

2025 RELEASE UNDER E.O. 14176

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
SANYAL FOR CONGRESS

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

| | |
|--|---------------------------|
| 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 | | | |
| 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 | Nature of Debt (Purpose): |
| Mailing Address | |
| City State Zip Code | |

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

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

NON-FUNCTIONAL

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

| | | | | | | | | | | | | | |
|--|--|------|----|------|----|----|------|----|----|------|----|----|------|
| Name of Principal Campaign Committee (In Full) SANYAL FOR CONGRESS | Report Covering Period: From: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">MM</td><td style="padding: 2px;">DD</td><td style="padding: 2px;">YYYY</td></tr><tr><td style="text-align: center;">04</td><td style="text-align: center;">01</td><td style="text-align: center;">2015</td></tr></table> To: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">MM</td><td style="padding: 2px;">DD</td><td style="padding: 2px;">YYYY</td></tr><tr><td style="text-align: center;">06</td><td style="text-align: center;">30</td><td style="text-align: center;">2015</td></tr></table> | MM | DD | YYYY | 04 | 01 | 2015 | MM | DD | YYYY | 06 | 30 | 2015 |
| MM | DD | YYYY | | | | | | | | | | | |
| 04 | 01 | 2015 | | | | | | | | | | | |
| MM | DD | YYYY | | | | | | | | | | | |
| 06 | 30 | 2015 | | | | | | | | | | | |

| | | |
|------------------------------------|--|--|
| Committee Name | (a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees | (b) Line No. 11(b) Total Contributions From Political Party Committees |
| A SANYAL FOR CONGRESS | | |
| B Column Total Last Page Only..... | | |

| | (c) Line No. 11(c) Total Contributions From Other Political Committees | (d) Line No. 11(d) Total Contributions From The Candidate | (e) Line No. 11(e) Total Contributions | (f) Line No. 12 Total Transfers From Other Authorized Committees | (g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate | (h) Line No. 13(b) Total All Other Loans |
|---|--|---|--|--|---|---|
| A | | | | | | |
| B | | | | | | |
| | (i) Line No. 13(c) Total Loans | (j) Line No. 14 Total Offsets to Operating Expenditures | (k) Line No. 15 Total Other Receipts | (l) Line No. 16 Total Receipts | (m) Line No. 17 Total Operating Expenditures | (n) Line No. 18 Total Transfers to Other Authorized Committees |
| A | | | | | | |
| B | | | | | | |
| | (o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate | (p) Line No. 19(b) Total Loan Repayments of All Other Loans | (q) Line No. 19(c) Total Loan Repayments | (r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons | (s) Line No. 20(b) Total Contribution Refunds to Political Party Committees | (t) Line No. 20(c) Total Contribution Refunds to Other Political Committees |
| A | | | | | | |
| B | | | | | | |
| | (u) Line No. 20(d) Total Contribution Refunds | (v) Line No. 21 Total Other Disbursements | (w) Line No. 22 Total Disbursements | (x) Line No. 23 Cash on Hand Beginning of Reporting Period | (y) Line No. 27 Cash on Hand Close of Reporting Period | (z) Line No. 9 Debts & Obligations Owed TO the Committee |
| A | | | | | | |
| B | | | | | | |
| | (aa) Line No. 10 Debts & Obligations Owed BY the Committee | (bb) Line No. 6(c) Net Contributions | (cc) Line No. 7(c) Net Operating Expenditures | | | |
| A | | | | | | |
| B | | | | | | |

2015-06-30 10:00:00 AM

010011-0000 1000 1000 1000 1000

7014 3490 0000 0204 6336

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.
CERTIFIED MAIL



7014 3490 0000 0204 6336

NYAL FOR CONGRESS
01 GLENHARDEN DRIVE
RALEIGH, N.C. 27613-1513

U.S. POSTAGE
PAID
RALEIGH, NC
27616
JUL 15, 15
AMOUNT
\$4.87
00119184-04



20463

1000

To: FEDERAL ELECTION COMMISSION
999 E STREET, NW
WASHINGTON, DC 20463

RECEIVED
FEC MAIL CENTR
2015 JUL 20 PM 12:

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

| | |
|--|---|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input type="checkbox"/> USPS First Class Mail | Date of Receipt |
| <input checked="" type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) 7/15/15 |
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| <input type="checkbox"/> USPS Priority Mail Express | Postmarked |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| | Next Business Day Delivery <input type="checkbox"/> |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |

CW
 PREPARER

7/20/15
 DATE PREPARED

NON-PROFIT CORPORATION