

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

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1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 FEC MAIL CENTER

The Committee to Elect Arican for Congress

ADDRESS (number and street) 416 Washington Ave

Check if different than previously reported. (ACC) Iron River MI 49935

2. FEC IDENTIFICATION NUMBER C00555664 3. IS THIS REPORT NEW (N) OR AMENDED (A) MI 01

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 08/05/2014 in the State of MI (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period 07/01/2014 through 07/16/2014

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 Rebecca Peterson Signature of Treasurer [Signature] Date 07/14/2014

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

Office Use Only table with 7 columns and 1 row. FEC FORM 3 (Revised 02/2003)

NON-FUNCTIONAL

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

The Committee to Elect Arcand for Congress

Report Covering the Period: From: 07 ' 01 ' 2014 To: 07 ' 16 ' 2014

	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))	1,934.00	
(b) Total Contribution Refunds (from Line 20(d))	0	
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1,934.00	
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3,999.57	
(b) Total Offsets to Operating Expenditures (from Line 14)	0	
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3,999.57	
8. Cash on Hand at Close of Reporting Period (from Line 27)	4,042.16	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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)

Page 3

Write or Type Committee Name

The Committee to Elect Arcand for Congress

Report Covering the Period: From: 07'01'2014 To: 07'01'2014

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 ▶

950.00
984.00
1,934.00

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

1,934.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

13. LOANS:

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

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)..... ▶

1,934.00

1500014000100001

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	3,999.57	
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES00	
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	
(b) Of All Other Loans00	
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees00	
(b) Political Party Committees.....	.00	
(c) Other Political Committees (such as PACs).....	.00	
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.00	
21. OTHER DISBURSEMENTS00	
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	3,999.57	

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6,107.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1,934.00
25. SUBTOTAL (add Line 23 and Line 24).....	8,041.73 5,438.51 (RA)
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3,999.57
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4,042.16

**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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 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)
The Committee to elect Arcand for Congress

A. Full Name (Last, First, Middle Initial)
Dave Coleman

Mailing Address
9622 Peterson Drive

City Iron Mountain State MI Zip Code 49801

FEC ID number of contributing federal political committee. C00555664

Name of Employer Retired Occupation _____

Receipt For: Primary General Other (specify) _____

Election Cycle-to-Date 400.00

Date of Receipt 07' 03' 2014

Amount of Each Receipt this Period 400.00

B. Full Name (Last, First, Middle Initial)
Kimberly Dowd

Mailing Address
5275 N. Lake Shore

City Harbor Springs State MI Zip Code 49740

FEC ID number of contributing federal political committee. C00555664

Name of Employer Self Employed Occupation owner of Edgewater Resort

Receipt For: Primary General Other (specify) _____

Election Cycle-to-Date 250.00

Date of Receipt 07' 13' 2014

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Bob Wolfe

Mailing Address
N4128 N US 2

City Iron Mountain State MI Zip Code 49801

FEC ID number of contributing federal political committee. C00555664

Name of Employer Self Employed Occupation owner of Edgewater Resort

Receipt For: Primary General Other (specify) _____

Election Cycle-to-Date 300.00

Date of Receipt 07' 14' 2014

Amount of Each Receipt this Period 300.00

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

TOTAL This Period (last page this line number only)..... 950.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

17 20a 18 20b 19a 20c 19b 21

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NAME OF COMMITTEE (In Full)

The Committee to Elect Arcand for Congress

Full Name (Last, First, Middle Initial)

A. The Crows Nest

Date of Disbursement

07 ' 07 ' 2014

Mailing Address

4601 N. State Rd

City

Harbor Springs

State

MI

Zip Code

49740

Amount of Each Disbursement this Period

720.00

Purpose of Disbursement

Travel expenses

002

Candidate Name

Alan Arcand

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: MI

District: I

Full Name (Last, First, Middle Initial)

B. Donhams Sports

Date of Disbursement

07 ' 06 ' 2014

Mailing Address

1401 D West main St.

City

Baylors

State

MI

Zip Code

49735

Amount of Each Disbursement this Period

447.71

Purpose of Disbursement

Office expenses

001

Candidate Name

Alan Arcand

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: MI

District: I

Full Name (Last, First, Middle Initial)

C. Precision Signs

Date of Disbursement

07 ' 03 ' 2014

Mailing Address

6125 Valley Dr

City

Bettendorf

State

IA

Zip Code

52722

Amount of Each Disbursement this Period

1,233.61

Purpose of Disbursement

Signs

003

Candidate Name

Alan Arcand

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: MI

District: I

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

2401.32

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 2 OF 2

<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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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)

The Committee to Elect Arcand for Congress

Full Name (Last, First, Middle Initial)

A.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code		
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code		
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

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

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

NAME OF COMMITTEE (In Full)

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)	▶	
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

11001 CONN LINEA

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)		Report Covering Period:				
		From:		To:		
		M - M / D - D / Y - Y - Y - Y		M - M / D - D / Y - Y - Y - Y		
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						
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. 15 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. 5(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A						
B						

FROM PAGE 1 DOWN

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ALAN ARCAND
ARCAND FOR CONGRESS
416 WASHINGTON AVE
IRON RIVER MI 49935

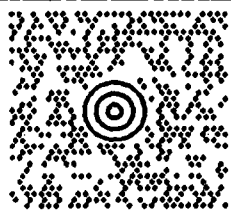
1 LBS

1 OF 1

DWT: 12,9,1

SHIP TO:

FEC
999 EAST STREET, NW
WASHINGTON DC 20463

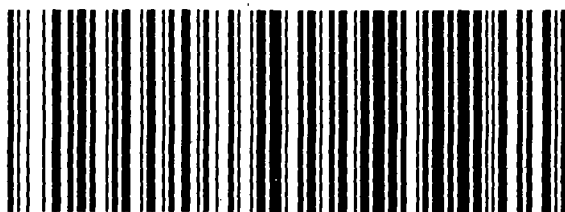


MD 201 9-83



UPS NEXT DAY AIR SAVER 1P

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US 16.5.32 WNTMV50 51.0A 04/2014



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<input type="checkbox"/> No Postmark	
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JAE
 PREPARER
 (8/2013)

7/23/14
 DATE PREPARED

11-001-0001-1001-1001