

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

Anthony Adams for Congress 2012

ADDRESS (number and street) ▼

603 E Alton Ave STE H

Check if different than previously reported. (ACC)

Santa Ana

CA

92705

2. **FEC IDENTIFICATION NUMBER** ▼

C C00513416

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA

08

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

M M / D D / Y Y Y Y

in the State of

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

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

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2012

through

M M / D D / Y Y Y Y
12 / 31 / 2012

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 Lysa Ray

Signature of Treasurer Lysa Ray

[Electronically Filed]

Date

M M / D D / Y Y Y Y
01 / 08 / 2012

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								
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FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Anthony Adams for Congress 2012

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))....	8150.00	29005.00
(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)).....	8150.00	29005.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3951.35	28785.25
(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)).....	3951.35	28785.25
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
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).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Anthony Adams for Congress 2012

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).....	8150.00	28505.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	8150.00	28505.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8150.00	29005.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	8150.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	8150.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	8150.00	37155.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3951.35	28785.25
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	8150.00	8150.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	8150.00	8150.00
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	219.75	219.75
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	12321.10	37155.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4171.10
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8150.00
25. SUBTOTAL (add Line 23 and Line 24).....	12321.10
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12321.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A

Transaction ID :

Bill was entered incorrectly - was for \$3000 not \$6990 - spoke to vendor and reviewed invoice. Treasurer error

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
	<input 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)
Anthony Adams for Congress 2012

Full Name (Last, First, Middle Initial) Anthony Adams		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2012	
Mailing Address 18019 Sequoia Ave.		Transaction ID : PAYA112	
City Hesperia	State CA	Zip Code 92345	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Wagner & Pelayes	Occupation Attorney		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 16300.00		

Full Name (Last, First, Middle Initial) Anthony Adams		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2012	
Mailing Address 18019 Sequoia Ave.		Transaction ID : PAYA113	
City Hesperia	State CA	Zip Code 92345	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7150.00	
Name of Employer Wagner & Pelayes	Occupation Attorney		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 16300.00		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	8150.00
TOTAL This Period (last page this line number only).....	8150.00

**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 7 OF 12			
	<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)
Anthony Adams for Congress 2012

Full Name (Last, First, Middle Initial) A. Lysa Ray Campaign Services			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012		
Mailing Address 603 E Alton Ave STE H			Amount of Each Disbursement this Period 200.00		
City Santa Ana	State CA	Zip Code 92705	Transaction ID : EXPB101		
Purpose of Disbursement Professional Services		001 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:				

Full Name (Last, First, Middle Initial) B. Lysa Ray Campaign Services			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012		
Mailing Address 603 E Alton Ave STE H			Amount of Each Disbursement this Period 200.00		
City Santa Ana	State CA	Zip Code 92705	Transaction ID : EXPB99		
Purpose of Disbursement Professional Services		001 Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Lysa Ray Campaign Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012		
Mailing Address 603 E Alton Ave STE H			Amount of Each Disbursement this Period 250.00		
City Santa Ana	State CA	Zip Code 92705	Transaction ID : EXPB102		
Purpose of Disbursement Professional Services/Treasurer		001 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).....	650.00
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 8 OF 12	
	<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)
Anthony Adams for Congress 2012

Full Name (Last, First, Middle Initial) A. Lysa Ray Campaign Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 603 E Alton Ave STE H		Amount of Each Disbursement this Period 301.35 Transaction ID : EXPB111
City Santa Ana	State CA	
Zip Code 92705	Purpose of Disbursement Professional Services/Treasurer	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) B. PJF Communications		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 451 Via Vaquero Sur		Amount of Each Disbursement this Period 3000.00 Transaction ID : EXPB95
City San Juan Bautista	State CA	
Zip Code 95045	Purpose of Disbursement Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) 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).....	3301.35
TOTAL This Period (last page this line number only).....	3951.35

**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 9 OF 12	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Anthony Adams for Congress 2012

Full Name (Last, First, Middle Initial) A. Anthony Adams		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 18019 Sequoia Ave.		Amount of Each Disbursement this Period 1000.00
City Hesperia State CA Zip Code 92345	Purpose of Disbursement	
Candidate Name	Category/Type	Transaction ID : PAYB112
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Anthony Adams		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 18019 Sequoia Ave.		Amount of Each Disbursement this Period 7150.00
City Hesperia State CA Zip Code 92345	Purpose of Disbursement	
Candidate Name	Category/Type	Transaction ID : PAYB113
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) 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	
Candidate Name	Category/Type	
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).....	8150.00
TOTAL This Period (last page this line number only).....	8150.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Anthony Adams for Congress 2012** Transaction ID : **PAYC7**

LOAN SOURCE Full Name (Last, First, Middle Initial) Anthony Adams	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 18019 Sequoia Ave.	

City	State	ZIP Code
Hesperia	CA	92345

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7150.00	7150.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 12 / Y 2012	M / D / Y . None	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).....	[] 0.00
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 : PAYC77

Anthony Adams for Congress 2012

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

Anthony Adams

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
18019 Sequoia Ave.

City State ZIP Code
Hesperia CA 92345

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1000.00 1000.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 07 / Y 2012 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)..... ▶ 0.00
TOTALS This Period (last page in this line only)..... ▶ 0.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Anthony Adams for Congress 2012

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lysa Ray Campaign Services

Mailing Address 603 E Alton Ave STE H

City State Zip Code
Santa Ana CA 92705

Nature of Debt (Purpose):
Professional Services

Outstanding Balance Beginning This Period **200.00** Transaction ID : **PAYD89**

Amount Incurred This Period **0.00** Payment This Period **200.00** Outstanding Balance at Close of This Period **0.00**

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

Mailing Address 451 Via Vaquero Sur

City State Zip Code
San Juan Bautista CA 95045

Nature of Debt (Purpose):
Consulting

Outstanding Balance Beginning This Period **6990.00** Transaction ID : **PAYD90**

Amount Incurred This Period **-3990.00** Payment This Period **3000.00** Outstanding Balance at Close of This Period **0.00**

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	0.00
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) ▶	