1597771506

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

2014 APR 21 AN 7: 27

---- Office User Only TER

1.	NAME OF COMMITTEE (in full)	TYPE OR PRIN		Example: If typing, ty over the lines.	/pe	12FE4M!	5		
K	ORPE FOR	0,0,N,6,R, E	500						
L				<u> </u>		للبلب			ليب
ADI	DRESS (number and street)	19512	MOUNT	VERNON	L.C.A.	U, O, 1, N	6		
	Check if different than previously reported. (ACC)	ALEXA	1, N, D, R, 1, A,		لا لـ	/_A	2,2,3	09]-[
2.	FEC IDENTIFICATION NU	JMBER ▼	CITY	.	ST.	ATE A		ZIP CODE	DISTRICT
	C005606	80	3. IS THIS REPORT	NEW (N) O	or X	AMENI (A)	DED	VA	08
4.	TYPE OF REPORT (Che (a) Quarterly Reports: April 15 Quarterly R	Report (Q1)	(b) 12-Day PF	RE-Election Report for Primary (12P) Convention (12C)		General (•	Run	off (12R)
	July 15 Quarterly R October 15 Quarter		Election o	on ÖÖ′°l	ر ا م ا	2012	ł	in the State of	VA
,	January 31 Year-En	d Report (YE)	(c) 30-Day PC	OST-Election Report General (30G)	for the:	Runoff (3	0R)	Spe	cial (30S)
	Termination Report	(TER)	Election o	M M / D	D / Y	* * * *		in the State of	
5.	Covering Period Ö	î ′°°° 1 ′	'2'0'1'4	through	° & °	<u> පී ්</u>	20	*1 4	
	ortify that I have examined the		o the best of my	knowledge and belie	of it is true,	correct an	d comple	ete.	
Sigi	nature of Treasurer				Date	, 8 4	L'°!	z '2	014
NO	E: Submission of false, errone	eous, or incomple	ete information ma	y subject the person	signing this	Report to	the penalt	ties of 2 U.S	.C. §437g.
<u> </u>	Office Use Only							FORM	

SUMMARY PAGE

of Receipts and Disbursements

Page 2

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

KORPE FOR CONGRETIS

Report Covering the Period:

From:

91'09'2614

To:

03 39 2014

				COLUMN A This Period		LUMN B Cycle-to-Date
6.	Net	Contributions (other than loans)				
	(a)	Total Contributions (other than loans) (from Line 11(e))	7	8,701.00	,	8,701.00
	(b)	Total Contribution Refunds (from Line 20(d))	,	,		, .
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	,	8,701.00	,	8,701.00
7.	Net	Operating Expenditures				
	(a)	Total Operating Expenditures (from Line 17)	,	7,141.80	,	7,14180
	(b)	Total Offsets to Operating Expenditures (from Line 14)	,	,	,	,
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	,	7,141.80	,	7,141.80
8.		sh on Hand at Close of porting Period (from Line 27)	,	6,913.21		
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	,	, 0.00		
10.	the	ots and Obligations Owed BY Committee (Itemize all on needule C and/or Sohedule D)	,	, 0.0 D		
						_

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

KNOOL	FOD.	MONIGOTC

Report Covering the Period:

Write or Type Committee Name

From:

"0"1 ' °0°1 ' '2 '0 ' 14

то: "03'31'2514

I. RECEIPTS			T	COLUMN A otal This Period	COLUMN B Election Cycle-to-Date		
11.	СО	NTRIBUTIONS (other than loans) FROM:					
	(a)	Individuals/Persons Other Than Political Committees		(P ~ 0 1 00			
		(i) Itemized (use Schedule A)	,	3,501.00	,	3,501.00	
		(ii) Uniternized	,	, .	,	,	
		(iii) TOTAL of contributions from individuals	,	3,501.00	,	3,501.00	
	(b)	The state of the s	7	,	,	, .	
		(such as PACs)	,	,	1	, •	
	(d) (e)	TOTAL CONTRIBUTIONS	,	5,200.00	,	5,200.00	
		(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	,	8,701.00	,	8,701.00	
12.		ANSFERS FROM OTHER THORIZED COMMITTEES	,	, .	,	,	
13.	LO	ANS:	•				
	(a)	Made or Guaranteed by the Candidate	7	5,354.01	,	5,354.01	
	٠.	All Other Loans	,	,	,	5 •	
	(c)	TOTAL LOANS (add Lines 13(a) and (b))	,	5,3 54.01	,	5,354.01	
14.		fsets to operating Penditures					
	(Re	funds, Rebates, etc.)	,	, .	,	, .	
15.		HER RECEIPTS	,	, .	3	,	
16.	11(TAL RECEIPTS (add Lines e), 12, 13(c), 14, and 15) rry Total to Line 24, page 4)	,	14,055.01	,	14,055.01	

DETAILED SUMMARY PAGE

of Disbursements FEC Form 3 (Revised 02/2003) Page 4 **COLUMN A COLUMN B** II. DISBURSEMENTS Total This Peried **Election Cycle-to-Date** 7,141.80 7,141.80 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate..... (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees (b) Political Party Committees..... Other Political Committees (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 7.141.80 7.141.80 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 0.00 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... , 14,055.01 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 14,055.01 25. SUBTOTAL (add Line 23 and Line 24)..... 7.141.80 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 6,913.21

(subtract Line 26 from Line 25).....

SCHEDULE	ΞΑ	(FEC	Form	3)
ITEMIZED	REC	EIPTS	•	

_		
SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one) 11a 11b 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports and Statements m or for commercial purnoses, other than using the name and a	ay not be sold or used by any paddress of any political committe	person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (IN FUII) KORPE FOR CONGREN		
Full Name (Last, First, Middle Initial) GOGOT , PARTHA Mailing Address 3879 BRADWATER ST. City State	Zip Code	Date of Receipt 03 31 2014
FEC ID number of contributing federal political committee.	2203	Amount of Each Receipt this Period
Name of Employer Receipt For: Primary General Other (specify) General	ycle-to-Date	- , ,500.00 -
Full Name (Last, First, Middle Initial) NARASIMHAN, SHTKAR Mailing Address 2502 VANDBURG (T. City State DUNN LORING VA	Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer BERMAN ADVICUAL Receipt For: Primary General Other (specify)		Amount of Each Receipt this Period , 1,000.00
Full Name (Last, First, Middle Initial) C. KORPE, POONUM S. Mailing Address 1850 CANDLEWOOD CT UN City State CHARLO'I TELVILUE VA	IT 20 Zip Code 22 N 3	Date of Receipt **Date of Receipt** **Date of Rec
FEC ID number of contributing federal political committee. Name of Employer UNIVERSITY OF VIRGINIA D	,	Amount of Each Receipt this Period , ,501.00
SUBTOTAL of Receipts This Page (optional)	, 2,001.00	

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

SCHEDULE A	(FEC	Form	3)
ITEMIZED REC	EIPTS	5	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one)
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name	person for the purpose of soliciting contributions	
NAME OF COMMITTEE (IN FUII) KORPE FOR CONGRESS		
A. Full Name (Last, First, Middle Initial) PATIL, RAT Mailing Address 899 FALLS MANOR CT. City Stat		Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Occup	pation	Amount of Each Receipt this Period
Y Primary General Other (specify)	on Cycle-to-Date	
B. Full Name (Last, First, Middle Initial) DES HPANDE, RAMES H G Mailing Address LWT KIRBY ROAD City State	e Zip Code	Date of Receipt #03'3'1'2'0'14
FEC ID number of contributing federal political committee.	0 20817	Amount of Each Receipt this Period
Name of Employer Coccup Receipt For: Primary Other (specify) Coccup Cocc	oation CONSULTANT on Cycle-to-Date	, ,500.00 -
Full Name (Last, First, Middle Initial) C		Date of Receipt
Mailing Address City State	e Zip Code	M M / D D / Y Y Y
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer Occup	pation	9 9
Receipt For: Election Primary General Other (specify)	on Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional)		, 1,500.00
TOTAL This, Period (last page this line number only)		, 3,501.00

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SCHEDULE B (FEC Form 3)	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE OF (check only one)
TEMIZED DISBURSEMENTS	Detailed Summary Page	17 18 19a 19b 20a 20b 20c 21
Any information copied from such Reports and Statements or for commercial our coses, other than using the name and	may not be sold or used by any Laddress of any political commit	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
KORPE FOR CONGRESS	<u> </u>	
Full Name (Last, First, Middle Initial)		Date of Disbursement
CYNTHIA BHAT NACKING		- "0"3 '3"1 '2"0"1"4
CYNTHIA BHAT NACAR Mailing Address 3309 GRAHAM RD		00 31 2014
City FALLS CHURCH VA	Zip Code 22042	Amount of Each Disbursement this Period
Purpose of Disbursement		, 1,001.00
Candidate Name	Category Type	
Office Sought: House Disbursement Formation Senate Primar		
President Other	(specify)	
State: District: Full Name (Last, First, Middle Initial)		
. DEMOCRATIC PARTY OF VIRG	/ A11A	Date of Disbursement
Mailing Address	[IV] I 3	03 31 2014
City State	Zip Code	Amount of Each Disbursement this Period
		1
Purpose of Disbursement		, 6,106.00
Purpose of Disbursement Candidate Name	Category Type	
Candidate Name Office Sought: House Disbursement Fo	Type or:	
Candidate Name Office Sought: House Disbursement For Senate Primar Other	Type or:	
Candidate Name Office Sought: House Disbursement Formate Primare	Type or: y General	<i>'</i>
Candidate Name Office Sought: House Senate Primar Other State: District: Full Name (Last, First, Middle Initial)	Type or: y General (specify)	Date of Disbursement
Candidate Name Office Sought:	Type or: y General (specify)	<i>'</i>
Candidate Name Office Sought: House Senate Primar Other State: District: Other State: District: Full Name (Last, First, Middle Initial) Control of the C	Type or: y General (specify)	Date of Disbursement Date of Disbursement Date of Disbursement Amount of Each Disbursement this Period
Candidate Name Office Sought: House Senate Primar Other State: District: Full Name (Last, First, Middle Initial) CTATE BOARD OF EVECTOR, Mailing Address	Type or: y General (specify)	Date of Disbursement
Candidate Name Office Sought: House Senate Primar Other State: District: Full Name (Last, First, Middle Initial) ** ** ** ** ** ** ** ** **	Type or: y General (specify)	Date of Disbursement Date of Disbursement Date of Disbursement Amount of Each Disbursement this Period , , 34.80
Candidate Name Office Sought: House Senate Primar Other State: District: Other State: District: Full Name (Last, First, Middle Initial) Candidate Name Office Sought: House Disbursement Formula (Last, First, Middle Initial)	Type Type Type Type Type Type Type Category Type Type Type	Date of Disbursement Date of Disbursement Date of Disbursement Amount of Each Disbursement this Period , , 34.80
Candidate Name Office Sought:	Type Type Type Type Type Type Type Category Type Type Type	Date of Disbursement Date of Disbursement Date of Disbursement Amount of Each Disbursement this Period , , 34.80
Candidate Name Office Sought:	Type Type Or: y	Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement Amount of Each Disbursement this Period , , 34.80
Candidate Name Office Sought:	Type Type Or: y	Date of Disbursement Date of Disbursement Date of Disbursement Amount of Each Disbursement this Period , , 34.80

SCHEDULE C (FEC Form	3)			Use separate sch for each category Detailed Summar	of the	FOR LINE N (check only		OF 13a 13b
NAME OF COMMITTEE (In Full) KORPE FOR	CONG	REIS						
LOAN SOURCE Full Name (Last KORPE, SATIST	, First, Mid			· — · — · — · — ·	Ele	ction: Primary		
Mailing Address 9512 MOMNT VE		ANDING				General Other (specify	<i>i</i>) \	
City ALEXANDRIA		State V A	ZIP Code		<u>-</u>			
Original Amount of Loan	1.01	Cumulative Pay	ment To D	ate	Balance	Outstanding at		This Perio
TERMS Date Incurred	-	D	ate Due	Interest	Rate		Secur	ed;
703 27 20	14 "	, w / D D	/ Y Y	, A A	•	% (apr)		es No
List All Endorsers or Guarantors		Loan Source						
1. Full Name (Last, First, Middle	Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	9	9	۵	
2. Full Name (Last, First, Middle I	nitial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	Ŋ	5	•	,
3. Full Name (Last, First, Middle I	Initial)			Name of Employer				
Mailing Address			-	Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	9	9	p	
4. Full Name (Last, First, Middle I	nitial)		1	Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	,	2	c	
SUBTOTALS This Period This Page	(optional)			·····		, 5	35	4.01 4.01
TOTALS This Period (last page in th	is line only)					, 5	,35	4.01
Carry outstanding balance only to L	INE 3, Sch	edule D, for this	line. If no	Schedule D, carry	forward	to appropriate	line of	Summary.

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		Tugo or concease o
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
KORPE FOR CONGRESS		
NORPE FOR CONDICAG		C
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
Full Name		
	, ,	. %
Mailing Address	Date Incurred or Established	M M / D D / Y Y Y
City State Zip Code	Date Due	— мм/вв/ууу
A. Has loan been restructured? No Yes	If yes, date originally incurred	у у у у о о и м м
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:	, ,
C. Are other parties secondarily liable for the debt incur No Yes (Endorsers and guarantors m	rred? oust be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates a stocks, accounts receivable, cash on deposit, or other No Yes If yes, specify:	of deposit, chattel papers, er similar traditional collateral?	What is the value of this collateral? , , , . Does the lender have a perfected security
E. Are any future contributions or tuture receipts of inte collateral for the loan? No Yes If yes,	rest income, pleaged as 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:	
Date account established:	Address:	
M M / D D / Y Y Y	City, State, Zip:	
F. If neither of the types of collateral described above a exceed the loan amount, state the basis upon which	was pledged for this loan, or if the	
G. COMMITTEE TREASURER		DATE
Typed Name Signature		M M / D D / Y Y Y
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 are accurate as stated above. II. The loan was made on terms and conditions (in similar extensions of credit to other borrowers of the institution is aware of the requirement that complied with the requirements set forth at 11	ncluding interest rate) no more fa of comparable credit worthiness. a loan must be made on a bas	evorable at the time than those imposed for
AUTHORIZED REPRESENTATIVE		DATE
Typed Name Signature	itle	M M / D / Y Y Y
1		İ

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each

PAGE

FOR LINE NUMBER: (check only one)	9

numbered line) **Excluding Loans** NAME OF COMMITTEE (in Full) KORPE FOR CONGRESS Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 Outstanding Balance at Close of This Period Payment 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)

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

lame	e of Principal Campaign	Committee (In Full)	Report Cover From:	ing Period:	To:	
	KORPE FOR	CONGRESU	of '	01 2014	1 03 31	2014
		Committee	(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		
			3,501.00	0		
c	olumn Total Last Page C	only	3,501.00	0		
	(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
Α	0	5,200.00	8,701.00	0.	5,354.01	0
В	0	5,200.00	8.701.00	0	5.354.01	0
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(I) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A	5,354.01	0	0	14,055.07	7,141.50	Ø
В	5,394.01	0	0	14,055.01	7,141,80	0
	(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	0	0	0	0	6	0
В	0	0	0	0	0	D
	(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	0	0	7,141,80	0	6,913.21	0
В	0	0	7,141,80	0	6,913.21	0
	(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	0	8,701.00	7,141.80			
В	0	8,701.00	7,141.80			

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RECEIVED

2014 APR 21 Ali 7: 27

FEC MAIL CENTED

FEDERAL ELECTION COMMISSION

WASHINGTON, DC 20463 999 E STREET, NW

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R CONGRESS UT VERNON LANDING

44, VA 28309

(8/2013)

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. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified 4/16/14 **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):