

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Gutierrez For 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))....	7763.88	104838.32
(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)).....	7763.88	104838.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	37565.83	287329.05
(b) Total Offsets to Operating Expenditures (from Line 14).....	300.00	6089.70
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	37265.83	281239.35
8. Cash on Hand at Close of Reporting Period (from Line 27).....	198054.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	20000.00	
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

Gutierrez For 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).....	3763.88	18836.21
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	3763.88	18836.21
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	4000.00	86002.11
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7763.88	104838.32
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	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	300.00	6089.70
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	3483.59
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	8063.88	114411.61

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	37565.83	287329.05
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) ►	37565.83	287329.05

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	227556.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8063.88
25. SUBTOTAL (add Line 23 and Line 24).....	235620.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	37565.83
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	198054.89

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Committee corrected the following items incorrectly posted: TLF Water Lily Flowers as \$91.04 should be \$91.94 and Erie House as \$120.00 should 156.36

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 41
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Sonia Anaya		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 3721 W. 51st St.		Transaction ID : C18802421
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed Realtor	Occupation Realtor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Jose A Cartagena Cartagena		Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address PO BOX 9120		Transaction ID : C18802423
City Caguas	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation RealEstate Investment	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Christopher J Foster		Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address PO BOX 9024028		Transaction ID : C18802422
City San Juan	State PR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation RealEstate	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**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 41
	<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)
Gutierrez For Congress

A. Full Name (Last, First, Middle Initial)
Nicolas Gautier Vega

Mailing Address **PO BOX 40244**

City **San Juan** State **PR** Zip Code **00940**

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 04 / 2014

Transaction ID : C18802424

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Cristobal Mendez

Mailing Address **Urb. Colinas de Monte Bello
Calle Vista Mar #10**

City **Trujillo Alto** State **PR** Zip Code **00976**

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

Name of Employer **Self** Occupation **Doctor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 14 / 2014

Transaction ID : C18802428

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Pedro J Muniz Garcia

Mailing Address **198 Calle Yale Th-2**

City **San Juan** State **PR** Zip Code **00927**

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

Name of Employer **Self** Occupation **Producer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 04 / 2014

Transaction ID : C18802426

Amount of Each Receipt this Period
250.00

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

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

850.00

**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 41
	<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)
Gutierrez For Congress

A. Full Name (Last, First, Middle Initial)
Edgar Rentas-Rivera

Mailing Address Urb. San Juan Gardens
1864 Calle San Alvaro

City San Juan State PR Zip Code 00926

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

Name of Employer Occupation
Dream Team Consulting Group, Inc. Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
699.98

Date of Receipt
M M / D D / Y Y Y Y
02 / 04 / 2014

Transaction ID : C18802432

Amount of Each Receipt this Period
599.98

* In-Kind: Food and Beverages fee for event

B. Full Name (Last, First, Middle Initial)
Edgar Rentas-Rivera

Mailing Address Urb. San Juan Gardens
1864 Calle San Alvaro

City San Juan State PR Zip Code 00926

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

Name of Employer Occupation
Dream Team Consulting Group, Inc. Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
699.98

Date of Receipt
M M / D D / Y Y Y Y
02 / 15 / 2014

Transaction ID : C18802430

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Carlos Rivera

Mailing Address Ave. Boulevard 1805 1st Section

City Toa Baja State PR Zip Code 00949

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

Name of Employer Occupation
Eco Green Light Corp Self

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 14 / 2014

Transaction ID : C18802429

Amount of Each Receipt this Period
100.00

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

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

799.98

**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 41
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Receipt M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 7000 West Forest Preserve Dr.		Transaction ID : C18802433
City Norridge	State IL	Zip Code 60634
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 13.90	
Name of Employer	Occupation	Refund from returned printer ink
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 13.90	

Full Name (Last, First, Middle Initial) B. Carlos M Velez Cruz		Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address Mans. de Garden Hills D6 Calle 8		Transaction ID : C18802425
City Guaynabo	State PR	Zip Code 00966
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer First Security Growth Solutions, Inc.	Occupation Banker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Edwin Vidal		Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address PO BOX 6167		Transaction ID : C18802427
City Caguas	State PR	Zip Code 00726
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Self	Occupation CPA	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

SUBTOTAL of Receipts This Page (optional).....	613.90
TOTAL This Period (last page this line number only).....	3763.88

**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 41
	<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)
Gutierrez For Congress

A. Full Name (Last, First, Middle Initial)
CSX Corporation Good Government Fund

Mailing Address 3699 Wilshire Blvd., 1290

City Los Angeles State CA Zip Code 90010

FEC ID number of contributing federal political committee. **C** C00163832

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
 02 / 04 / 2014

Transaction ID : C18802420

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Richard E. Neal For Congress Committee

Mailing Address 78 Magnolia Terrace

City Springfield State MA Zip Code 01108

FEC ID number of contributing federal political committee. **C** C00226522

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
 02 / 04 / 2014

Transaction ID : C18802418

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
UNIVISION COMMUNICATIONS INC. POLITICAL ACTION COM

Mailing Address 3699 Wilshire Blvd
Ste 1290

City Los Angeles State CA Zip Code 90010-2732

FEC ID number of contributing federal political committee. **C** C00435735

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
 02 / 04 / 2014

Transaction ID : C18802419

Amount of Each Receipt this Period
 1000.00

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

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

4000.00

4000.00

**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 41
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) Soraida Gutierrez		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 26 / 2014
Mailing Address 5310 W.Cullom Ave.		Transaction ID : C18802434
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Homemaker	Occupation Information Requested	Charges to wrong acct.
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

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

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. C		Charges to wrong acct.
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).....	300.00
TOTAL This Period (last page this line number only).....	300.00

**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 12 OF 41	
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. 3DNA-Nationbuilder		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 448 S. Build St.		Amount of Each Disbursement this Period 19.00 Transaction ID : D422985
City Los Angeles State CA Zip Code 90013	Purpose of Disbursement Website database	
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:		

Full Name (Last, First, Middle Initial) B. Advanced Network Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 236 Massachusetts Ave., NE, Suite		Amount of Each Disbursement this Period 550.00 Transaction ID : D422997
City Washington State DC Zip Code 20002	Purpose of Disbursement Fundraiser retainer fee	
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:		

Full Name (Last, First, Middle Initial) C. Amazon.com		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address 1200 12th Avenue South		Amount of Each Disbursement this Period 345.40 Transaction ID : D422944
City Seattle State WA Zip Code 98144	Purpose of Disbursement Appreciation Books	
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).....	914.40
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 13 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. American Airlines Travel Center			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 776 K. Street, NW			Amount of Each Disbursement this Period 312.00 Transaction ID : D422937
City Washington	State DC	Zip Code 20006	
Purpose of Disbursement travel exp. to FEC conference tampa		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. American Airlines Travel Center			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 776 K. Street, NW			Amount of Each Disbursement this Period 1334.00 Transaction ID : D422955
City Washington	State DC	Zip Code 20006	
Purpose of Disbursement Travel exp. Immigration events candidate and spouse		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) C. American Airlines Travel Center			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 776 K. Street, NW			Amount of Each Disbursement this Period 383.00 Transaction ID : D422960
City Washington	State DC	Zip Code 20006	
Purpose of Disbursement Travel CHCI event 3/14		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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)	2029.00
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 14 OF 41		
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. American Airlines Travel Center		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 776 K. Street, NW		Amount of Each Disbursement this Period 278.00 Transaction ID : D422961
City Washington State DC Zip Code 20006	Purpose of Disbursement travel expense adjustment for Miami event	
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:		

Full Name (Last, First, Middle Initial) B. Herman D Andrew		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 409 7th St., NW, Suite 200		Amount of Each Disbursement this Period 5940.00 Transaction ID : D422996
City Washington State DC Zip Code 20004	Purpose of Disbursement Legal Services	
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:		

Full Name (Last, First, Middle Initial) c. At&T Wireless		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 8220		Amount of Each Disbursement this Period 173.30 Transaction ID : D422994
City Aurora State IL Zip Code 60572	Purpose of Disbursement Bus. phone exp.	
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).....	6391.30
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 15 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. At&T Wireless		Date of Disbursement
Mailing Address PO Box 8220		M M / D D / Y Y Y Y 01 / 22 / 2014
City Aurora	State IL	Zip Code 60572
Purpose of Disbursement Bus. phone	Amount of Each Disbursement this Period 281.93	
Candidate Name	Transaction ID : D422992	
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Atlas		Date of Disbursement
Mailing Address 1 Jeff Fugua Blvd		M M / D D / Y Y Y Y 01 / 15 / 2014
City Orlando	State FL	Zip Code 32827
Purpose of Disbursement travel exp. FEC Regional Conference	Amount of Each Disbursement this Period 29.53	
Candidate Name	Transaction ID : D422934	
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Auntie Anne's		Date of Disbursement
Mailing Address O'Hare Airport		M M / D D / Y Y Y Y 01 / 17 / 2014
City Chicago	State IL	Zip Code 60666
Purpose of Disbursement Meal	Amount of Each Disbursement this Period 3.64	
Candidate Name	Transaction ID : D422928	
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	315.10
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 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Bearnise		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 313 Pennsylvania Ave. SE		Amount of Each Disbursement this Period 104.66 Transaction ID : D422924
City Washington State DC Zip Code 20003	Purpose of Disbursement meeting expense	
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:		

Full Name (Last, First, Middle Initial) B. Budget		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 1 airport Blvd		Amount of Each Disbursement this Period 29.86 Transaction ID : D422984
City Orlando State FL Zip Code 32827	Purpose of Disbursement travel expense	
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:		

Full Name (Last, First, Middle Initial) c. Coco Beach Golf and Country Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address Rio Grande		Amount of Each Disbursement this Period 42.80 Transaction ID : D422976
City Rio Grande State PR Zip Code 00936	Purpose of Disbursement meeting expense	
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).....	177.32
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 17 OF 41		
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Counter Burger		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address Miami International Airport		Amount of Each Disbursement this Period 22.42
City Tampa	State FL Zip Code 33607	
Purpose of Disbursement Meal	Candidate Name	Transaction ID : D422969
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. CVS Pharmacy (N)		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 2815 N. Western		Amount of Each Disbursement this Period 5.41
City Chicago	State IL Zip Code 60618	
Purpose of Disbursement office exp. batteries	Candidate Name	Transaction ID : D422946
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Denny's		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 1000 West 49th St.		Amount of Each Disbursement this Period 36.31
City Hialeah	State FL Zip Code 33012	
Purpose of Disbursement meeting expense	Candidate Name	Transaction ID : D422970
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	64.14
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 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial)
A. Department of the Treasury (IRS)

Mailing Address 324 25th St.

City Ogden State UT Zip Code 84401

Purpose of Disbursement USA tax payment IRS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 01 / 29 / 2014

Amount of Each Disbursement this Period: 27.00

Transaction ID : D422988

Full Name (Last, First, Middle Initial)
B. Department of the Treasury (IRS)

Mailing Address 324 25th St.

City Ogden State UT Zip Code 84401

Purpose of Disbursement USA tax payment IRS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 01 / 29 / 2014

Amount of Each Disbursement this Period: 120.75

Transaction ID : D422991

Full Name (Last, First, Middle Initial)
c. Department of Treasury Illinois Department of Revenue

Mailing Address PO BOX 19043

City Springfield State IL Zip Code 62794

Purpose of Disbursement Il Dept. of revenue withholding

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 01 / 29 / 2014

Amount of Each Disbursement this Period: 225.00

Transaction ID : D422990

SUBTOTAL of Disbursements This Page (optional) 372.75

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 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Erie Cafe		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 536 W. Erie St.		Amount of Each Disbursement this Period 156.36
City Chicago	State IL Zip Code 60654	
Purpose of Disbursement meeting expense	Candidate Name	Transaction ID : D422953
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Express Car Wash		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 2111 W. Fullerton Ave		Amount of Each Disbursement this Period 6.00
City Chicago	State IL Zip Code 60647	
Purpose of Disbursement Vehicale expense	Candidate Name	Transaction ID : D422954
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Express Car Wash		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address 2111 W. Fullerton Ave		Amount of Each Disbursement this Period 3.00
City Chicago	State IL Zip Code 60647	
Purpose of Disbursement Vehicale expense	Candidate Name	Transaction ID : D422942
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	165.36
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 20 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Express Car Wash		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2014
Mailing Address 2111 W. Fullerton Ave		Amount of Each Disbursement this Period 3.00
City Chicago	State IL Zip Code 60647	
Purpose of Disbursement Bus. Vehicle exp.	Category/Type	Transaction ID : D422919
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. F & L Transportation Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 4333 Bayside Village Dr.		Amount of Each Disbursement this Period 13.00
City Tampa	State FL Zip Code 33615	
Purpose of Disbursement Transportation to airport FEC Conference	Category/Type	Transaction ID : D422965
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) c. Ecliserio Figueroa		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 5310 W. Cullom		Amount of Each Disbursement this Period 300.00
City Chicago	State IL Zip Code 60641	
Purpose of Disbursement Bus. Vehicle parking garage exp. Oct., Nov., and December 2013	Category/Type	Transaction ID : D422999
Candidate Name		
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).....	316.00
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 21 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address PO Box 542000		Amount of Each Disbursement this Period 399.00 Transaction ID : D422995
City Omaha	State NE	
Zip Code 68154	Purpose of Disbursement Bus. Vehicle	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) B. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address PO Box 542000		Amount of Each Disbursement this Period 399.00 Transaction ID : D423090
City Omaha	State NE	
Zip Code 68154	Purpose of Disbursement Bus. Vehicle	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) c. From You Flowers		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 483 W. 37th St.		Amount of Each Disbursement this Period 62.47 Transaction ID : D422926
City New York	State NY	
Zip Code 10018	Purpose of Disbursement Flower congratulations	Category/ Type
Candidate Name	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).....	860.47
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 22 OF 41	
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Frontera O'hare Int'l Airport		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address O'hare Int'l Airport		Amount of Each Disbursement this Period 18.23 Transaction ID : D422966
City Chicago State IL Zip Code 60666	Purpose of Disbursement Meal	
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:		

Full Name (Last, First, Middle Initial) B. FTD The Flowers Experts		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 3113 Woodcreek Dr		Amount of Each Disbursement this Period 191.97 Transaction ID : D422981
City Downers Grove State IL Zip Code 60515	Purpose of Disbursement flower boquet for funeral	
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:		

Full Name (Last, First, Middle Initial) c. Fushion Flame		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 615 Channelside Drive		Amount of Each Disbursement this Period 20.37 Transaction ID : D422959
City Tampa State FL Zip Code 33602	Purpose of Disbursement Meal Fec conference	
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).....	230.57
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 23 OF 41	
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. G-Miami Food (Miami International Airport)		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 2100 NW 42nd Ave.		Amount of Each Disbursement this Period 3.22
City Miami State FL Zip Code 33299	Purpose of Disbursement Meal	
Candidate Name	Category/Type	Transaction ID : D423099
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:		

Full Name (Last, First, Middle Initial) B. Gandy Citgo		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 4702 W. Gandy Blvd		Amount of Each Disbursement this Period 17.02
City Tampa State FL Zip Code 33611	Purpose of Disbursement travel expense	
Candidate Name	Category/Type	Transaction ID : D423100
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:		

Full Name (Last, First, Middle Initial) C. Great American Bagel		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address O'hare Int'l Airport		Amount of Each Disbursement this Period 5.28
City Chicago State IL Zip Code 60666	Purpose of Disbursement Meal	
Candidate Name	Category/Type	Transaction ID : D422956
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).....	25.52
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 24 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Groupon Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address MCC 7299		Amount of Each Disbursement this Period 82.94
City Chicago	State IL	
Zip Code 60654	Purpose of Disbursement Office and phone and Bus. Car storage exp.	Transaction ID : D422936
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:		

Full Name (Last, First, Middle Initial) B. Groupon Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2014
Mailing Address MCC 7299		Amount of Each Disbursement this Period 43.65
City Chicago	State IL	
Zip Code 60654	Purpose of Disbursement computer keyboard and cover	Transaction ID : D422986
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:		

Full Name (Last, First, Middle Initial) c. Reinaldo Guerra		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 7606 Fly Loop		Amount of Each Disbursement this Period 24.50
City Gibsonton	State FL	
Zip Code 33534	Purpose of Disbursement travel taxi exp.	Transaction ID : D422957
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).....	151.09
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 25 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Soraida Gutierrez		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 5310 W.Cullom Ave.		Amount of Each Disbursement this Period 4500.00 Transaction ID : D422987
City Chicago	State IL Zip Code 60641	
Purpose of Disbursement Office Manager, treasurer and fundraising		Category/ Type
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. Hilton Providence		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2014
Mailing Address 21 Atwells Ave.		Amount of Each Disbursement this Period 172.37 Transaction ID : D422941
City Providence	State RI Zip Code 02903	
Purpose of Disbursement travel lodging exp.		Category/ Type
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) c. Illinois Department of Transportation		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 2700 Ogden Ave.		Amount of Each Disbursement this Period 108.50 Transaction ID : D422933
City Downers Grove	State IL Zip Code 60515	
Purpose of Disbursement Vehicale expense		Category/ Type
Candidate Name		
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).....	4780.87
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 26 OF 41		
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Italian Village Restarants		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 71 West Monroe St.		Amount of Each Disbursement this Period 69.84 Transaction ID : D422968
City Chicago	State IL Zip Code 60603	
Purpose of Disbursement meeting expense	Category/Type	
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. J&K Consultants, Inc		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 4507 W. Lawrence Ave.		Amount of Each Disbursement this Period 125.00 Transaction ID : D422971
City Chicago	State IL Zip Code 60630	
Purpose of Disbursement Accounting fee services	Category/Type	
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) c. J&K Consultants, Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 4507 W. Lawrence Ave.		Amount of Each Disbursement this Period 125.00 Transaction ID : D422952
City Chicago	State IL Zip Code 60630	
Purpose of Disbursement Accounting fee services	Category/Type	
Candidate Name		
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).....	319.84
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 27 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. J&K Consultants, Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 4507 W. Lawrence Ave.		Amount of Each Disbursement this Period 630.00 Transaction ID : D422920
City Chicago	State IL Zip Code 60630	
Purpose of Disbursement Accounting fee services	Category/Type	
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. Johnny Rockets		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2014
Mailing Address P.O. Box 66048		Amount of Each Disbursement this Period 5.07 Transaction ID : D422939
City Chicago	State IL Zip Code 60666	
Purpose of Disbursement Meal	Category/Type	
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) c. Johnny's Half Shell		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 400 North Capitol St NW		Amount of Each Disbursement this Period 500.00 Transaction ID : D422929
City Washington	State DC Zip Code 20001	
Purpose of Disbursement fundraising event	Category/Type	
Candidate Name		
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).....	630.00
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 28 OF 41	
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Johnny's Half Shell		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 400 North Capitol St NW		Amount of Each Disbursement this Period 2145.00 Transaction ID : D422930
City Washington State DC Zip Code 20001	Purpose of Disbursement Food and Beverages fee for fundrasing event	
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:		

Full Name (Last, First, Middle Initial) B. La Carreta Restaurant, Miami, Int. airport		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 2100 NW 42nd Ave.		Amount of Each Disbursement this Period 3.22 Transaction ID : D422967
City Miami State FL Zip Code 33142	Purpose of Disbursement Meal	
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:		

Full Name (Last, First, Middle Initial) c. Las Asadas		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 2072 N. Western Ave.		Amount of Each Disbursement this Period 12.78 Transaction ID : D422964
City Chicago State IL Zip Code 60647	Purpose of Disbursement Meal	
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).....	2161.00
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 29 OF 41	
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Luis Arroyo for Cook County Commissioner		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 4892 W. Armitage Ave.		Amount of Each Disbursement this Period 2000.00 Transaction ID : D423000
City Chicago	State IL Zip Code 60639	
Purpose of Disbursement Political Contribution	Category/Type	
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. Marshals		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 4725 North Harlem Ave.		Amount of Each Disbursement this Period 16.37 Transaction ID : D422983
City Chicago	State IL Zip Code 60656	
Purpose of Disbursement folder divider for office	Category/Type	
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) C. Miller Chevalier		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2014
Mailing Address 655 Fifteenth St., N.W., Suite 900		Amount of Each Disbursement this Period 3100.00 Transaction ID : D423001
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Professional legal services	Category/Type	
Candidate Name		
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).....	5116.37
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 30 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Nomorerack		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 381 Park Ave. South		Amount of Each Disbursement this Period 41.00 Transaction ID : D422980
City New York State NY Zip Code 10016	Purpose of Disbursement Computer, phone & office hardware	
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:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 2928 N. Ashland		Amount of Each Disbursement this Period 19.12 Transaction ID : D422921
City Chicago State IL Zip Code 60657	Purpose of Disbursement Office supplies	
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:		

Full Name (Last, First, Middle Initial) c. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 249 Fifth Ave.		Amount of Each Disbursement this Period 3.00 Transaction ID : D422993
City Pittsburgh State PA Zip Code 15222	Purpose of Disbursement Service Charge	
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).....	63.12
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 31 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Pollo Campero Lngly Park Adelphi MD		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 11420 Georgia Ave.		Amount of Each Disbursement this Period 36.00 Transaction ID : D422958
City Silver Spring	State MD	
Zip Code 20902	Purpose of Disbursement meeting expense	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) B. Popeyes Tampa International Airport		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 4100 George		Amount of Each Disbursement this Period 9.93 Transaction ID : D422962
City Tampa	State FL	
Zip Code 33607	Purpose of Disbursement Meal	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) C. Publix		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 1500 S. Douglas RD		Amount of Each Disbursement this Period 19.19 Transaction ID : D422975
City Miami	State FL	
Zip Code 33134	Purpose of Disbursement Meal	Category/ Type
Candidate Name	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).....	65.12
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 32 OF 41		
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Rayburn Building		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address East Capitol, NE and 1st. . NE		Amount of Each Disbursement this Period 8.70
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Meal	Transaction ID : D422925
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:		

Full Name (Last, First, Middle Initial) B. Rayburn Deli		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address Rayburn House Office Building		Amount of Each Disbursement this Period 21.85
City Washinton	State DC	
Zip Code 20515	Purpose of Disbursement Meal	Transaction ID : D422950
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:		

Full Name (Last, First, Middle Initial) c. Rayburn Deli		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address Rayburn House Office Building		Amount of Each Disbursement this Period 44.90
City Washinton	State DC	
Zip Code 20515	Purpose of Disbursement meeting expense	Transaction ID : D422951
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).....	75.45
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 33 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Edgar Rentas-Rivera		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address Urb. San Juan Gardens 1864 Calle San Alvaro		Amount of Each Disbursement this Period 599.98
City San Juan State PR Zip Code 00926	Purpose of Disbursement Food and Beverages fee for event	
Candidate Name		Transaction ID : D422914
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)	* In-Kind Received
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Replacement Lap Key		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address MCC 7372		Amount of Each Disbursement this Period 33.59
City Foothill Ranch State CA Zip Code 92610	Purpose of Disbursement computer keys replaced	
Candidate Name		Transaction ID : D422935
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:	Category/Type	

Full Name (Last, First, Middle Initial) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 5201 W. Addison		Amount of Each Disbursement this Period 43.51
City Chicago State IL Zip Code 60641	Purpose of Disbursement Vehicale expense	
Candidate Name		Transaction ID : D422947
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	677.08
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 34 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Soundz Good Roscoe Village			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 3449 W. Western Ave.			Amount of Each Disbursement this Period 149.00 Transaction ID : D422938
City Chicago	State IL	Zip Code 60618	
Purpose of Disbursement Bus. Car expense		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. Southwest Airlines-Texas			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2014
Mailing Address 2800 N. Terminal Rd			Amount of Each Disbursement this Period 40.00 Transaction ID : D422940
City Houston	State TX	Zip Code 77032	
Purpose of Disbursement travel expense		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) C. Southwest Airlines-Texas			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 2800 N. Terminal Rd			Amount of Each Disbursement this Period 173.00 Transaction ID : D422923
City Houston	State TX	Zip Code 77032	
Purpose of Disbursement travel exp. immigration event 1/18		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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).....	362.00
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 35 OF 41		
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 1300 N. Ashland Ave		Amount of Each Disbursement this Period 83.07
City Chicago	State IL Zip Code 60622	
Purpose of Disbursement Office supplies	Candidate Name	Transaction ID : D422932
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 7000 West Forest Preserve Dr.		Amount of Each Disbursement this Period 109.15
City Norridge	State IL Zip Code 60634	
Purpose of Disbursement Office supplies	Candidate Name	Transaction ID : D422977
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 7000 West Forest Preserve Dr.		Amount of Each Disbursement this Period 26.20
City Norridge	State IL Zip Code 60634	
Purpose of Disbursement Ink Printer	Candidate Name	Transaction ID : D422978
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	218.42
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 36 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. State Farm Insurance		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 68002		Amount of Each Disbursement this Period 594.83 Transaction ID : D422974
City Dallas State TX Zip Code 75368	Purpose of Disbursement Bus. Vehicle semiannual premium	
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:		

Full Name (Last, First, Middle Initial) B. State Of Illinois Department of Employment Security		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 33 South State St.		Amount of Each Disbursement this Period 24.75 Transaction ID : D422989
City Chicago State IL Zip Code 60603	Purpose of Disbursement State of IL Employer Contribution	
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:		

Full Name (Last, First, Middle Initial) c. Subway Isla Verde		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2014
Mailing Address Plazoleta de isla verde SE		Amount of Each Disbursement this Period 11.77 Transaction ID : D422948
City San Juan State PR Zip Code 00918	Purpose of Disbursement Meal	
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).....	631.35
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 37 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Subway Miami		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 5749 SW Bird Road		Amount of Each Disbursement this Period 5.35
City Miami	State FL Zip Code 33155	
Purpose of Disbursement Meal	Candidate Name	Transaction ID : D422972
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Sylvester Management		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 7522 Irmo Dr. Suite 1		Amount of Each Disbursement this Period 575.00
City Colombia	State SC Zip Code 29212	
Purpose of Disbursement FEC Regional Conference Tampa	Candidate Name	Transaction ID : D422931
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. The Biltmore Hotel And Suites Coral Gables Fl		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 1200 Anastasia Ave.		Amount of Each Disbursement this Period 997.31
City Coral Gables	State FL Zip Code 33134	
Purpose of Disbursement Lodging exp. Immigration event	Candidate Name	Transaction ID : D422973
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1577.66
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 38 OF 41	
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. The Container Store		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address 908 West North Ave.		Amount of Each Disbursement this Period 6.54 Transaction ID : D422943
City Chicago State IL Zip Code 60622	Purpose of Disbursement Office supplies	
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:		

Full Name (Last, First, Middle Initial) B. Thomas A. Jaconetty		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 33 North LaSalle Street Suite 3		Amount of Each Disbursement this Period 6711.50 Transaction ID : D422998
City Chicago State IL Zip Code 60602	Purpose of Disbursement Political consultant and research	
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:		

Full Name (Last, First, Middle Initial) c. TLF Water Lily Flower		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 7152 W. Higgins		Amount of Each Disbursement this Period 91.94 Transaction ID : D422982
City Chicago State IL Zip Code 60656	Purpose of Disbursement flower boquet for funeral	
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).....	6809.98
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 39 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Trattoria Alberto			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014	
Mailing Address 506 8th Street SE			Amount of Each Disbursement this Period 199.50	
City Washington	State DC	Zip Code 20003	Transaction ID : D422949	
Purpose of Disbursement meeting expense		Category/ Type		
Candidate Name				
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:				

Full Name (Last, First, Middle Initial) B. United Airlines DC			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014	
Mailing Address 1025 Connecticut Ave			Amount of Each Disbursement this Period 432.00	
City Washington	State DC	Zip Code 20036	Transaction ID : D422945	
Purpose of Disbursement Travel exp. for 4/2014		Category/ Type		
Candidate Name				
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:				

Full Name (Last, First, Middle Initial) c. United Airlines DC			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2014	
Mailing Address 1025 Connecticut Ave			Amount of Each Disbursement this Period 743.00	
City Washington	State DC	Zip Code 20036	Transaction ID : D422979	
Purpose of Disbursement travel expense		Category/ Type		
Candidate Name				
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).....	1374.50
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 40 OF 41			
	<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)
Gutierrez For Congress

Full Name (Last, First, Middle Initial) A. Votesane PAC		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address PO BOX 2713		Amount of Each Disbursement this Period 25.00 Transaction ID : D422913
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Processing fee (Sonia Anaya)	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) B. Westin Tampa Harbour Island		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 725 S. Harbour Island Blvd		Amount of Each Disbursement this Period 660.02 Transaction ID : D422963
City Tampa	State FL	
Zip Code 33602	Purpose of Disbursement Lodging exp. FEC Conference	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) c. Zoots Cafe O'hare International Airport		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 10000 W. O'hare Terminal 1		Amount of Each Disbursement this Period 4.96 Transaction ID : D422927
City Chicago	State IL	
Zip Code 60666	Purpose of Disbursement Meal	Category/ Type
Candidate Name	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).....	689.98
TOTAL This Period (last page this line number only).....	37565.83

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gutierrez For Congress** Transaction ID : **L854**

LOAN SOURCE Full Name (Last, First, Middle Initial) Centro Sin Fronteras	Election: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2716 W Division St	

City	State	ZIP Code
Chicago	IL	60622-2853

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	5000.00	20000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
10 / 12 / 2010	10/21/2012	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="20000.00"/>
TOTALS This Period (last page in this line only).....	<input type="text" value="20000.00"/>

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