

KORPE FOR CONGRESS
9512 Mount Vernon Landing , Alexandria, VA 22309

RECEIVED
FEC MAIL CENTER
2015 NOV 16 AM 8:23

November 11, 2015

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

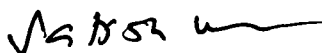
Re: Korpe for Congress FEC Form 3

Dear Sir/Ma'am,

This letter is in support of the Report of Receipts and Disbursements for the Korpe for Congress committee. In accordance with the termination report, total cash on hand at close of the reporting period was (\$ 710.47). Satish Korpe will not seek reimbursement from the committee for the net loss of \$ 710.47.

Please accept this as the official notification for request of termination of the Korpe for Congress committee.

Thank you.



Satish Korpe
Treasurer
Korpe for Congress

NOV 11 10 00 AM '15

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
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Office Use ONLY NOV 16 AM 8:24

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

KORPE FOR CONGRESS

ADDRESS (number and street) 19512 MOUNT VERNON LANDING

Check if different than previously reported. (ACC)

ALEXANDRIA VA 22309-1

CITY ▲ STATE ▲ ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C00560680

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

STATE ▼ DISTRICT VA 108

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on M M / D D / Y Y Y Y in the State of

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

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

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 09' 01' 20' 15 through 10' 31' 20' 15

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer SATISH W. KORPE

Signature of Treasurer *Satish W. Korpe* Date 11' 10' 20' 15

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

KORPE FOR CONGRESS

Report Covering the Period: From:

09 ' 01 ' 2015

To:

10 ' 31 ' 2015

COLUMN A
This Period

COLUMN B
Election Cycle-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions
(other than loans) (from Line 11(e))....

0.00

18,809.00

(b) Total Contribution Refunds
(from Line 20(d)).....

0.00

0.00

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a)).....

0.00

18,809.00

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17).....

0.00

25,848.00

(b) Total Offsets to Operating
Expenditures (from Line 14).....

0.00

0.00

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a)).....

0.00

25,848.00

8. Cash on Hand at Close of
Reporting Period (from Line 27).....

0.00

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D).....

0.00

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D).....

0.00

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

KORPE FOR CONGRESS

Report Covering the Period: From:

09 ' 01 ' 2015

To:

10 ' 31 ' 2015

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

0.00

10,478.00

(ii) Unitemized.....

0.00

3,131.00

(iii) TOTAL of contributions from individuals ▶

0.00

13,609.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

5,200.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

0.00

18,809.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

6,329.01

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

6,329.01

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

0.00

0.00

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

0.00

0.00

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

0.00

25,138.01

20151116 01:00 PM

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	0.00	25,848.48
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) ▶	0.00	0.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	(710.47)
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	(710.47)
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	0.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	(710.47)

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

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

FOR LINE NUMBER:		PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

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

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

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

SUBTOTAL of Receipts This Page (optional).....	<input type="text"/>
TOTAL This Period (last page this line number only).....	<input type="text"/> 0.00

20090208 10:00 AM

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought:	Disbursement For:	<input type="text"/>
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought:	Disbursement For:	<input type="text"/>
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought:	Disbursement For:	<input type="text"/>
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	<input type="text"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="0.00"/>

20090201 10:00 AM

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE OF

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

NAME OF COMMITTEE (In Full)

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

Mailing Address

City State ZIP Code

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

TERMS Date Incurred Date Due Interest Rate Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only)..... ▶

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

20151119 01:00:00

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

Supplementary for
 Information found on
 Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER C _____	
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan _____	Interest Rate (APR) _____ %	
Mailing Address	Date Incurred or Established ____/____/____	Date Due ____/____/____	
City	State	Zip Code	
A. Has loan been restructured? <input type="checkbox"/> No <input type="checkbox"/> Yes		If yes, date originally incurred ____/____/____	
B. If line of credit, Amount of this Draw: _____		Total Outstanding Balance: _____	
C. Are other parties secondarily liable for the debt incurred? <input type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the value of this collateral? _____ Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? _____	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: _____		Location of account: Address: _____ City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE ____/____/____	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE ____/____/____	
Title			

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SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

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

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

2011-11-10 10:01:00 AM

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)


Name of Principal Campaign Committee (In Full) <div style="font-size: 1.2em; font-family: cursive;">KORPE FOR CONGRESS</div>	Report Covering Period: From: M M ' D D ' Y Y Y Y M M ' D D ' Y Y Y Y <div style="font-size: 1.2em; font-family: cursive;">09 ' 01 ' 2015</div> To: M M ' D D ' Y Y Y Y M M ' D D ' Y Y Y Y <div style="font-size: 1.2em; font-family: cursive;">10 ' 31 ' 2015</div>
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Committee Name				(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees	
A				0.00	0.00	
B	Column Total Last Page Only.....			0.00	0.00	
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A	0.00	0.00	0.00	0.00	0.00	0.00
B	0.00	0.00	0.00	0.00	0.00	0.00
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A	0.00	0.00	0.00	0.00	0.00	0.00
B	0.00	0.00	0.00	0.00	0.00	0.00
	(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	0.00	0.00	0.00	0.00	0.00	0.00
B	0.00	0.00	0.00	0.00	0.00	0.00
	(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	0.00	0.00	0.00	(710.47)	(710.47)	0.00
B	0.00	0.00	0.00	(710.47)	(710.47)	0.00
	(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	0.00	0.00	0.00			
B	0.00	0.00	0.00			

2015 RELEASE UNDER E.O. 13526

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 11/11/15
<input type="checkbox"/> USPS Registered/Certified	Date of Receipt 11/16/15
<input type="checkbox"/> USPS Priority Mail	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER
(3/2015)

11/16/15
DATE PREPARED

NON-FEDERAL DOCUMENT