

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

STEPHEN SANDSTROM FOR CONGRESS

ADDRESS (number and street) 10 WEST BROADWAY SUITE 500

Check if different than previously reported. (ACC)

SALT LAKE CITY

UT

84101

2. **FEC IDENTIFICATION NUMBER** ▼

C C00503045

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

UT

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 MM / DD / YYYY in the State of

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

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

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY 07 / 01 / 2011

through

MM / DD / YYYY 09 / 30 / 2011

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 Mike McCauley

Signature of Treasurer Mike McCauley

[Electronically Filed]

Date

MM / DD / YYYY 10 / 14 / 2011

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**STEPHEN SANDSTROM FOR CONGRESS**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2011 To: M M / D D / Y Y Y Y 09 / 30 / 2011

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	3400.00	3400.00
(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)).....	3400.00	3400.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	14169.22	14169.22
(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)).....	14169.22	14169.22
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>51089.38</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>61858.60</b>	

**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

**STEPHEN SANDSTROM FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3300.00	3300.00
(ii) Unitemized.....	100.00	100.00
(iii) TOTAL of contributions from individuals ▶	3400.00	3400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3400.00	3400.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	61858.60	61858.60
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	61858.60	61858.60
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	<b>65258.60</b>	<b>65258.60</b>

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14169.22	14169.22
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	14169.22	14169.22

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	65258.60
25. SUBTOTAL (add Line 23 and Line 24).....	65258.60
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14169.22
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	51089.38

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N

Transaction ID :

For all contributors with occupation/employer information listed as 'Best Efforts', specific procedures were followed as required by the Bipartisan Campaign Reform Act (the act). The committee will amend this report or provide the information in a subsequent filing via form 99 as allowed by the act when the information is received from the donor.

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 21
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**STEPHEN SANDSTROM FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Alan Johnson**

Mailing Address 631 North Bella Vista Dr.

City Orem State UT Zip Code 84097

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

Name of Employer IMS Masonry Occupation Mason Contractor

Receipt For: 2012  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2011

**Transaction ID : SA11AI.4119**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jill Nicolson**

Mailing Address 433 North 600 East

City Lindon State UT Zip Code 84042

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2012  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.4123**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dan Rich**

Mailing Address 2790 South Decker Lake Dr.

City Salt Lake City State UT Zip Code 84119

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

Name of Employer Recovery Express Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.4121**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

3000.00

**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 7 OF 21
	<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)  
**STEPHEN SANDSTROM FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Chris Smith</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 500 South 600 West		<b>Transaction ID : SA11Al.4125</b>
City Midway	State UT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Best Efforts	Occupation Best Efforts	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 300.00	

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	3300.00

**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 21
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**STEPHEN SANDSTROM FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Stephen Sandstrom</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2011	
Mailing Address 1775 Skyline Drive		<b>Transaction ID : SA13A.4105</b>	
City Orem State UT Zip Code 84097	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Loan from candidate		
Name of Employer Sandstrom Architecture Occupation Architect	Election Cycle-to-Date 5000.00		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention			

Full Name (Last, First, Middle Initial) <b>B. Stephen Sandstrom</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 18 / 2011	
Mailing Address 1775 Skyline Drive		<b>Transaction ID : SA13A.4106</b>	
City Orem State UT Zip Code 84097	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C	Loan from candidate		
Name of Employer Sandstrom Architecture Occupation Architect	Election Cycle-to-Date 15000.00		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention			

Full Name (Last, First, Middle Initial) <b>C. Stephen Sandstrom</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 09 / 2011	
Mailing Address 1775 Skyline Drive		<b>Transaction ID : SA13A.4107</b>	
City Orem State UT Zip Code 84097	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C	Loan from candidate		
Name of Employer Sandstrom Architecture Occupation Architect	Election Cycle-to-Date 25000.00		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25000.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]



**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 21
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**STEPHEN SANDSTROM FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Sandstrom**

Mailing Address 1775 Skyline Drive

City Orem State UT Zip Code 84097

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

Name of Employer Sandstrom Architecture Occupation Architect

Receipt For: 2012  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
 \_\_\_\_\_ 26858.60

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2011

**Transaction ID : SA13A.4132**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1858.60

Loan from candidate

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Sandstrom**

Mailing Address 1775 Skyline Drive

City Orem State UT Zip Code 84097

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

Name of Employer Sandstrom Architecture Occupation Architect

Receipt For: 2012  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
 \_\_\_\_\_ 38858.60

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2011

**Transaction ID : SA13A.4108**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 12000.00

Loan from candidate

**C.** Full Name (Last, First, Middle Initial)  
**Stephen Sandstrom**

Mailing Address 1775 Skyline Drive

City Orem State UT Zip Code 84097

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

Name of Employer Sandstrom Architecture Occupation Architect

Receipt For: 2012  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
 \_\_\_\_\_ 46858.60

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2011

**Transaction ID : SA13A.4109**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 8000.00

Loan from candidate

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 21858.60
<b>TOTAL</b> 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 10 OF 21
<input type="checkbox"/> 11a 12	<input checked="" 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)  
**STEPHEN SANDSTROM FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Sandstrom**

Mailing Address 1775 Skyline Drive

City Orem State UT Zip Code 84097

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

Name of Employer Sandstrom Architecture Occupation Architect

Receipt For: 2012  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
**56858.60**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2011**

**Transaction ID : SA13A.4110**

Amount of Each Receipt this Period  
**10000.00**

Loan from candidate

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Sandstrom**

Mailing Address 1775 Skyline Drive

City Orem State UT Zip Code 84097

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

Name of Employer Sandstrom Architecture Occupation Architect

Receipt For: 2012  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
**61858.60**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2011**

**Transaction ID : SA13A.4129**

Amount of Each Receipt this Period  
**5000.00**

Loan from candidate

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**15000.00**

**61858.60**

**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 11 OF 21			
	<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)  
**STEPHEN SANDSTROM FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Comprehensive Strategic Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2011
Mailing Address P.O. Box 3923		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.4111</b>
City Salt Lake City	State UT	
Zip Code 84110	Purpose of Disbursement Political & campaign consulting fees	Category/ Type 001
Candidate Name <b>STEPHEN SANDSTROM FOR CONGRESS</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

Full Name (Last, First, Middle Initial) <b>B. Comprehensive Strategic Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2011
Mailing Address P.O. Box 3923		Amount of Each Disbursement this Period 1125.00 <b>Transaction ID : SB17.4113</b>
City Salt Lake City	State UT	
Zip Code 84110	Purpose of Disbursement Political & campaign consulting fees	Category/ Type 001
Candidate Name <b>STEPHEN SANDSTROM FOR CONGRESS</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

Full Name (Last, First, Middle Initial) <b>c. Comprehensive Strategic Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address P.O. Box 3923		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : SB17.4115</b>
City Salt Lake City	State UT	
Zip Code 84110	Purpose of Disbursement Political & campaign consulting fees	Category/ Type 001
Candidate Name <b>STEPHEN SANDSTROM FOR CONGRESS</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10125.00
<b>TOTAL</b> 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 12 OF 21			
	<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)  
**STEPHEN SANDSTROM FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Comprehensive Strategic Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011
Mailing Address P.O. Box 3923		Amount of Each Disbursement this Period 775.00
City Salt Lake City	State UT	
Zip Code 84110	Purpose of Disbursement Political & campaign consulting fees	Transaction ID : SB17.4118
Candidate Name <b>STEPHEN SANDSTROM FOR CONGRESS</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT District:		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011
Mailing Address Via Internet		Amount of Each Disbursement this Period 1858.60
City	State	
Zip Code	Purpose of Disbursement Airline tickets for campaign travel	Transaction ID : SB17.4133
Candidate Name <b>STEPHEN SANDSTROM FOR CONGRESS</b>	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT District:		

Full Name (Last, First, Middle Initial) <b>c. McCauley &amp; Associates, P.C.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 10 West Broadway, Suite 500		Amount of Each Disbursement this Period 897.50
City Salt Lake City	State UT	
Zip Code 84101	Purpose of Disbursement Accounting & reporting fees	Transaction ID : SB17.4116
Candidate Name <b>STEPHEN SANDSTROM FOR CONGRESS</b>	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3531.10
<b>TOTAL</b> 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 21	
	<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)  
**STEPHEN SANDSTROM FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Rebecca McCloud</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2011
Mailing Address 5 South 500 West, #917		Amount of Each Disbursement this Period 327.15 <b>Transaction ID : SB17.4130</b>
City State Zip Code Salt Lake City UT 84101	Purpose of Disbursement Telephone purchase for campaign use 001 Category/Type	
Candidate Name <b>STEPHEN SANDSTROM FOR CONGRESS</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: UT District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	327.15
<b>TOTAL</b> This Period (last page this line number only).....	13983.25

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **STEPHEN SANDSTROM FOR CONGRESS** Transaction ID : **SC/10.4105**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Stephen Sandstrom</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Convention</b>
Mailing Address 1775 Skyline Drive		

City	State	ZIP Code
Orem	UT	84097

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
08 / 02 / 2011	On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **STEPHEN SANDSTROM FOR CONGRESS** Transaction ID : **SC/10.4106**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Stephen Sandstrom</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Convention</b>
Mailing Address 1775 Skyline Drive		

City	State	ZIP Code
Orem	UT	84097

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
08 / 18 / 2011	On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **STEPHEN SANDSTROM FOR CONGRESS** Transaction ID : **SC/10.4107**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Stephen Sandstrom</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Convention</b>
Mailing Address 1775 Skyline Drive		

City	State	ZIP Code
Orem	UT	84097

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
09 / 09 / 2011	On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **STEPHEN SANDSTROM FOR CONGRESS** Transaction ID : **SC/10.4132**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Stephen Sandstrom</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Convention</b>
Mailing Address 1775 Skyline Drive		

City	State	ZIP Code
Orem	UT	84097

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1858.60	0.00	1858.60

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y Y Y Y 09 / 15 / 2011	M M / D D / Y Y Y Y On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	1858.60
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>		

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **STEPHEN SANDSTROM FOR CONGRESS** Transaction ID : **SC/10.4108**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Stephen Sandstrom</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Convention</b>
Mailing Address 1775 Skyline Drive		

City	State	ZIP Code
Orem	UT	84097

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
12000.00	0.00	12000.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	09 / 16 / 2011	On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	12000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **STEPHEN SANDSTROM FOR CONGRESS** Transaction ID : **SC/10.4109**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Stephen Sandstrom</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Convention</b>
Mailing Address 1775 Skyline Drive		

City	State	ZIP Code
Orem	UT	84097

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
8000.00	0.00	8000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
09 / 23 / 2011	On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	8000.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **STEPHEN SANDSTROM FOR CONGRESS** Transaction ID : **SC/10.4110**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Stephen Sandstrom</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Convention</b>
Mailing Address 1775 Skyline Drive		

City	State	ZIP Code
Orem	UT	84097

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

<b>TERMS</b>		Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 27 / Y 2011	M M / D D / Om Demand			0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **STEPHEN SANDSTROM FOR CONGRESS** Transaction ID : **SC/10.4129**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Stephen Sandstrom</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Convention</b>
Mailing Address 1775 Skyline Drive		

City	State	ZIP Code
Orem	UT	84097

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

<b>TERMS</b>		Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 30 / Y 2011	M / D / Y On Demand			0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	61858.60

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