

**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

Botelho for Congress

ADDRESS (number and street)

13610 Avenue 21 1/2

Check if different  
than previously  
reported. (ACC)

Chowchilla

CA

93610

2. FEC IDENTIFICATION NUMBER ▼

C

C00549519

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

CA

16

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Jen Slater

Signature of Treasurer Jen Slater

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

04

10

2014

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**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 18

Write or Type Committee Name

**Botelho for Congress**

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 1 |   | 2 | 0 | 1 | 4 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 1 | 4 |

|  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....  | 2585.00                 | 10160.00                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....  | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 2585.00                 | 10160.00                           |
| 7. Net Operating Expenditures  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....   | 8627.30                 | 12796.92                           |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....   | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 8627.30                 | 12796.92                           |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....  | 9864.85                 |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 19445.50                |                                    |

**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 / 18

Write or Type Committee Name

Botelho for Congress

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 1 |   | 2 | 0 | 1 | 4 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 1 | 4 |

**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).....

2250.00

8150.00

(ii) Unitemized.....

335.00

900.00

(iii) TOTAL of contributions from individuals ▶

2585.00

9050.00

(b) Political Party Committees.....

0.00

0.00

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

0.00

0.00

(d) The Candidate.....

0.00

1110.00

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

2585.00

10160.00

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

0.00

0.00

## 13. LOANS:

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

12500.00

12500.00

(b) All Other Loans.....

0.00

0.00

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

12500.00

12500.00

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

0.00

0.00

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

0.00

1.77

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

15085.00

22661.77

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 18

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 8627.30                       | 12796.92                           |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 8627.30                       | 12796.92                           |

## **III. CASH SUMMARY**

|   |          |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 3407.15  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 15085.00 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 18492.15 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 8627.30  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 9864.85  |

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

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

FOR LINE NUMBER:

PAGE 5 OF 18

(check only one)

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

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)  
**Botelho for Congress**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>Don Nelson</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br><b>01 / 27 / 2014</b> |
| Mailing Address <b>1909 Evergreen Place</b>   |   | <b>Transaction ID : INCA34</b>                                  |
| City<br><b>Madera</b>   | State<br><b>CA</b>                      | Zip Code<br><b>93637</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>250.00</b>             |
| Name of Employer<br><b>Midland Tractor</b>  | Occupation<br><b>Manager</b>            |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>250.00</b> |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>Danny Maddalena</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br><b>01 / 30 / 2014</b> |
| Mailing Address <b>21649 Robertson Blvd</b>   |   | <b>Transaction ID : INCA40</b>                                  |
| City<br><b>Chowchilla</b>   | State<br><b>CA</b>                      | Zip Code<br><b>93610</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>500.00</b>             |
| Name of Employer<br><b>Dan Maddalena</b>  | Occupation<br><b>Farmer</b>             |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>500.00</b> |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>Russell Harris</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br><b>03 / 04 / 2014</b> |
| Mailing Address <b>PO Box 787</b>   |  | <b>Transaction ID : INCA54</b>                                  |
| City<br><b>Chowchilla</b>   | State<br><b>CA</b>                       | Zip Code<br><b>93610</b>  |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><b>1000.00</b>            |
| Name of Employer<br><b>Harris Ranch</b>   | Occupation<br><b>Owner</b>               |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>1000.00</b> |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>1750.00</b> |
| <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 6 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Botelho for Congress**

Full Name (Last, First, Middle Initial)

**David A. Johannsen**

Mailing Address 5290 Overpass Rd Ste 208

City

Santa Barbara

State

CA

Zip Code

93111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Johannsen & Associates

Occupation  
Investment Advisor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 11 / 2014

Transaction ID : INCA57

Amount of Each Receipt this Period

500.00

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 / D D / Y Y Y Y

Amount of Each Receipt this Period

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 / D D / 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).....

500.00

2250.00

# **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 18

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Botelho for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joanna Botelho - Personal Funds**

Mailing Address 13610 Avenue 21 1/2

City State Zip Code  
 Chowchilla CA 93610

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 LJB Farms, LLC

Occupation  
 Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

15460.00

Date of Receipt

**03** / **04** / **2014**

**Transaction ID : PAYA53**

Amount of Each Receipt this Period

1850.00

Filing Fee

**[MEMO ITEM]**

**B.** 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

/ /

Amount of Each Receipt this Period

**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

/ /

Amount of Each Receipt this Period

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

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

0.00

0.00

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

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

FOR LINE NUMBER:

PAGE 8 OF 18

(check only one)

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

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NAME OF COMMITTEE (In Full)

Botelho for Congress

Full Name (Last, First, Middle Initial)

Joanna Botelho - Personal Funds

Mailing Address 13610 Avenue 21 1/2

City

Chowchilla

State

CA

Zip Code

93610

FEC ID number of contributing federal political committee.

C

Name of Employer

LJB Farms, LLC

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

15460.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 15  |   | 2014    |

Transaction ID : PAYA38

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

Joanna Botelho - Personal Funds

Mailing Address 13610 Avenue 21 1/2

City

Chowchilla

State

CA

Zip Code

93610

FEC ID number of contributing federal political committee.

C

Name of Employer

LJB Farms, LLC

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

15460.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 28  |   | 2014    |

Transaction ID : PAYA63

Amount of Each Receipt this Period

7500.00

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 | / | D D | / | 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).....

12500.00

12500.00



# **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 9 OF 18

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

**Botelho for Congress**

Full Name (Last, First, Middle Initial)

## **A. DirectFile**

Mailing Address 504 Van Ness Ave

City State Zip Code  
 Fresno CA 93721

Purpose of Disbursement  
 Financial Analyst

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 01 / 13 / 2014

Amount of Each Disbursement this Period

843.75

Transaction ID : EXPB21

## **B. DiscoverCard**

Mailing Address PO Box 29033

City State Zip Code  
 Phoenix AZ 85038

Purpose of Disbursement  
 Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 01 / 27 / 2014

Amount of Each Disbursement this Period

71.00

Transaction ID : EXPB35

## **c. US Postmaster**

Mailing Address Main Office

City State Zip Code  
 Chowchilla CA 93610

Purpose of Disbursement  
 Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 01 / 27 / 2014

Amount of Each Disbursement this Period

71.00

Transaction ID : PDTB1EXPB35

[MEMO ITEM]

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

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

914.75

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 18

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**Botelho for Congress**

Full Name (Last, First, Middle Initial)

**A. Dane & Associates**

Mailing Address 5044 Ladies Tresses Place

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 30  |   | 2014    |

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Broomfield | CO    | 80023    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1112.23 |
|---------|

Purpose of Disbursement  
Survey

001

Transaction ID : EXPB41

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. eFundraising Connections**

Mailing Address 2131 Capitol Ave, #306

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2014    |

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Sacramento | CA    | 95816    |

Amount of Each Disbursement this Period

|       |
|-------|
| 18.00 |
|-------|

Purpose of Disbursement  
Credit Card Processing Fees

001

Transaction ID : EXPB43

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. VoterLink**

Mailing Address 13348 Alpine Cove Drive

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 03  |   | 2014    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Alpine | UT    | 84004    |

Amount of Each Disbursement this Period

|        |
|--------|
| 250.00 |
|--------|

Purpose of Disbursement  
Voter Data

001

Transaction ID : EXPB42

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

1380.23

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 18

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**Botelho for Congress**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address Payment Center

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 10  |   | 2014    |

City State Zip Code

Memphis TN

Amount of Each Disbursement this Period

|       |
|-------|
| 18.54 |
|-------|

Purpose of Disbursement  
Shipping Costs

001

Transaction ID : EXPB44

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. R. David Sowers**

Mailing Address 9518 Milan Drive

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 12  |   | 2014    |

City State Zip Code

Stockton CA 95212

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
Photography Services

001

Transaction ID : EXPB45

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**c. Deluxe Check Printing**

Mailing Address PO Box 742572

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 20  |   | 2014    |

City State Zip Code

Cincinnati OH 45274

Amount of Each Disbursement this Period

|        |
|--------|
| 165.10 |
|--------|

Purpose of Disbursement  
Check Printing Costs

001

Transaction ID : EXPB47

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

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

1183.64

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 18

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**Botelho for Congress**

Full Name (Last, First, Middle Initial)

**A. Campaign Compliance Group, Inc.**

Mailing Address 8001 Irvine Center Drive, #400

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Irvine | CA    | 92618    |

Purpose of Disbursement  
Financial Analyst

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 21  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 900.00 |
|--------|

Transaction ID : EXPB48

**B. Secretary of State**

Mailing Address 1500 11th St, Room 495

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Sacramento | CA    | 95814    |

Purpose of Disbursement  
Filing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1619.36 |
|---------|

Transaction ID : EXPB52

**C. 3AM Communications**

Mailing Address 1821 Concord Ave

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Stockton | CA    | 95204    |

Purpose of Disbursement  
Website Design Costs

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 10  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1500.00 |
|---------|

Transaction ID : EXPB55

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

4019.36

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 18

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**Botelho for Congress**

Full Name (Last, First, Middle Initial)

**A. eFundraising Connections**

Mailing Address 2131 Capitol Ave, #306

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Sacramento | CA    | 95816    |

Purpose of Disbursement  
Credit Card Processing Fees

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 14  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 72.25 |
|-------|

Transaction ID : EXPB60

**B. DiscoverCard**

Mailing Address PO Box 29033

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Phoenix | AZ    | 85038    |

Purpose of Disbursement  
Fedex Office - Copying Costs

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 28  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 70.00 |
|-------|

Transaction ID : EXPB65

**c. FedexOffice**

Mailing Address 393 W Shaw Ave Ste A

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Clovis | CA    | 93612    |

Purpose of Disbursement  
Printing Costs

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 28  |   | 2014    |

Amount of Each Disbursement this Period

|       |
|-------|
| 70.00 |
|-------|

Transaction ID : EDTB7EXPB65

[MEMO ITEM]

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

|       |
|-------|
| 72.25 |
|-------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 18

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**Botelho for Congress**

Full Name (Last, First, Middle Initial)

**A. DiscoverCard**

Mailing Address PO Box 29033

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Phoenix | AZ    | 85038    |

Purpose of Disbursement  
Credit Card Payment

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2014    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1057.07 |
|---------|

Transaction ID : EXPB64

**B. County of Madera Registrar of Voters**

Mailing Address 200 W 4th Street

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Madera | CA    | 93637    |

Purpose of Disbursement  
Filing Fees

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 948.00 |
|--------|

Transaction ID : EDTB6EXPB64

[MEMO ITEM]

**c. FedexOffice**

Mailing Address 393 W Shaw Ave Ste A

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Clovis | CA    | 93612    |

Purpose of Disbursement  
Printing Costs

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2014    |

Amount of Each Disbursement this Period

|        |
|--------|
| 109.07 |
|--------|

Transaction ID : EDTB5EXPB64

[MEMO ITEM]

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

|         |
|---------|
| 1057.07 |
|---------|

|         |
|---------|
| 8627.30 |
|---------|

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

PAGE 15 OF 18

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☐ 13a  
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC38

Botelho for Congress

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

Joanna Botelho - Personal Funds

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

13610 Avenue 21 1/2

City

State

ZIP Code

Chowchilla

CA

93610

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
01 / 15 / 2014

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

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)..... ►

5000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 16 OF 18

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

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC63

Botelho for Congress

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

Joanna Botelho - Personal Funds

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

13610 Avenue 21 1/2

City

State

ZIP Code

Chowchilla

CA

93610

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
03 / 28 / 2014

Date Due

M M / D D / Y Y Y Y  
03/28/2015

Interest Rate

0.00

% (apr)

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)..... ►

7500.00

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

12500.00

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



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 17 OF 18

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Botelho for Congress**

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

**Joanna Botelho - Personal Funds**Nature of Debt (Purpose):  
Filing Fee

Mailing Address 13610 Avenue 21 1/2

City State

Zip Code

Chowchilla

CA

93610

Outstanding Balance Beginning This Period

0.00

**Transaction ID : PAYD53**

Amount Incurred This Period

1850.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1850.00

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

**Campaign Compliance Group, Inc.**Nature of Debt (Purpose):  
Financial Analyst

Mailing Address 8001 Irvine Center Drive, #400

City State

Zip Code

Irvine

CA

92618

Outstanding Balance Beginning This Period

0.00

**Transaction ID : PAYD56**

Amount Incurred This Period

900.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

900.00

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

**DirectFile**Nature of Debt (Purpose):  
Financial Analyst

Mailing Address 504 Van Ness Ave

City

State

Zip Code

Fresno

CA

93721

Outstanding Balance Beginning This Period

843.75

**Transaction ID : PAYD20**

Amount Incurred This Period

0.00

Payment This Period

843.75

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ►

2750.00

2) **TOTALS** This Period (last page this line number only) ..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

0.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 18 OF 18

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Botelho for Congress**

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

**Precision Sign & Banners**

Nature of Debt (Purpose):

Outdoor Signs

Mailing Address 1055 Valley Drive

City State

Zip Code

Riverdale

IA

52722

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD61

Amount Incurred This Period

4195.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

4195.50

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) .....

4195.50

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

6945.50

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

12500.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

19445.50