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Image# 14960714800

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Com	mittee			Office Use Only
NAME OF COMMITTEE (in	TYPE OR PRII		cample: If typinger the lines.	g, type	12FE4M5	
Chris Andrade	for Congress					1
ADDRESS (number an	d street)	agg Rd.				
Check if dif	Suite 110A					
than previous reported. (A	ısly Fayetteville				NC :	28303
2. FEC IDENTIFIC	CATION NUMBER	CITY			STATE A	ZIP CODE
C C0055568	30	3. IS THIS REPORT	X NEW	OR	AMEND (A)	STATE ▼ DISTRICT DED NC 07 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
4. TYPE OF REI	PORT (Choose One)	(b) 12-Day PRE	-Election Repo	out for the		
(a) Quarterly Re	eports:	(b) 12-Day PRE	·		1	П
× April 15	Quarterly Report (Q1)		Primary (12P)	General (1	2G) Runoff (12R)
luly 15	Quarterly Report (Q2)	Ш	Convention (12C)	Special (1	2S)
	r 15 Quarterly Report (Q3)	Election on	M M /	D D /	YYYY	in the State of
January	31 Year-End Report (YE)	(c) 30-Day POS	ST -Election Rep	port for the:		
			General (30G	i)	Runoff (30	Special (30S)
Termina	tion Report (TER)	Election on	M M /	D D /	Y " Y " Y	in the State of
5. Covering Period	M M / D D D 01	/ Y Y Y Y 2014	through	M M M 03	31	Y Y Y Y Y 2014
I certify that I have e	xamined this Report and	to the best of my ki	nowledge and	belief it is tr	ue, correct and	l complete.
Type or Print Name of	of Treasurer Brandon Kie	ehne				
Signature of Treasure	Brandon Kiehne		[Electronically I	Filed] D	Date 04	/ D D / Y Y Y Y Y Y 2014
NOTE: Submission of	false, erroneous, or incomp	olete information may	subject the per	son signing t	this Report to the	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 16

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Chris Andrade for Congress

01 03 31 2014 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 6665.00 6665.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 50.00 50.00 (from Line 20(d)) (c) Net Contributions (other than loans) 6615.00 6615.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 14581.32 14581.32 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 14581.32 14581.32 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 6387.32 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 14353.64 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 16

Write or Type Committee Name

Chris Andrade for Congress

Report Covering the Period: From: 01 01 2014 To: 03 31 2014

	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)	250.00	250.00
	(ii) Unitemized	315.00	315.00
	(iii) TOTAL of contributions from individuals	565.00	565.00
((b) Political Party Committees	0.00	0.00
((c) Other Political Committees (such as PACs)	100.00	100.00
	(d) The Candidate(e) TOTAL CONTRIBUTIONS	6000.00	6000.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	6665.00	6665.00
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
	LOANS:		
((a) Made or Guaranteed by the Candidate	15000.00	15000.00
((b) All Other Loans	0.00	0.00
((c) TOTAL LOANS (add Lines 13(a) and (b))	15000.00	15000.00
	OFFSETS TO OPERATING		
	EXPENDITURES Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	21665.00	21665.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

pursements

PAGE 4 / 16

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	14581.32	14581.32
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	646.36	646.36
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	646.36	646.36
20	REFUNDS OF CONTRIBUTIONS TO:		
20.	(a) Individuals/Persons Other	50.00	50.00
	Than Political Committees	50.00	50.00
	(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))	50.00	50.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	15277.68	15277.68
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	TING PERIOD	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line 1	6, page 3)	21665.00
25.	SUBTOTAL (add Line 23 and Line 24)		21665.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	n Line 22)	15277.68
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		6387.32

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE 5 OF (check only one) $|X|_{11a}$ 11b 11c 12 13a

16

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Chris Andrade for Congress Full Name (Last, First, Middle Initial) Chris A.D. Andrade Date of Receipt Mailing Address 56 Cordage Circle 2014 30 City State Zip Code Transaction ID: SA11AI.4163 GΑ 31407 Port WentWorth FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Individual Contribution Via PayPal U.S. Army Soldier Receipt For: 2014 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... 250.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 16 (check only one)
Any information copied from such Reports and State or for commercial purposes, other than using the na		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Chris Andrade for Congress		
Full Name (Last, First, Middle Initial) Committee to Elect Jerry Reinoehl		
Mailing Address PO Box 8188		Date of Receipt
City Fayetteville	State Zip Code NC 28311	03 16 2014
	C	Amount of Each Receipt this Period
	ccupation	Non-Federally Registered Committee Permissible
Receipt For: 2014 Primary General Other (specify)	lection Cycle-to-Date	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / 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 O	ccupation	
Receipt For: Primary General Other (specify)	lection Cycle-to-Date]
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / 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 O	ccupation	
Receipt For: Primary General Other (specify)	lection Cycle-to-Date]

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

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

100.00

SCHEDULE A (FEC Form 3)

	FOR LINE NUMBER:			PAGE		7 (OF	16		
Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)									
		11a		11b		11c	X	11d		
		12		13a		13b		14		15
y not be sold or used by any person for the purpose of soliciting contributions ldress of any political committee to solicit contributions from such committee.										

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and ad NAME OF COMMITTEE (In Full) Chris Andrade for Congress Full Name (Last, First, Middle Initial) Christopher Alen Andrade Date of Receipt Mailing Address 7031 Kittridge Dr 2014 31 City State Zip Code Transaction ID: SA11D.4154 NC 28314 Fayetteville FEC ID number of contributing Amount of Each Receipt this Period H4NC07084 federal political committee. 6000.00 Name of Employer Occupation Contribution from Candidate Retired Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 21000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 6000.00 SUBTOTAL of Receipts This Page (optional)..... 6000.00

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

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

Image# 14960714807				
SCHEDULE A (FEC Form 3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
Any information copied from such Reports or for commercial purposes, other than using				
NAME OF COMMITTEE (In Full) Chris Andrade for Congress	1			
A. Full Name (Last, First, Middle Initial) Christopher Alen Andrade Mailing Address 7031 Kittridge Dr			Date of Receipt	/ Y T Y T Y T Y T Y T Y T Y T Y T Y T Y
City State Fayetteville NC		Zip Code 28314	Transaction ID : SA13	
FEC ID number of contributing federal political committee.	С ни	NC07084	Amount of Each Rec	ceipt this Period
N	10		- 	15000.00

Full Name (Last, First, Middle Initial) Christopher Alen Andrade		Polos (Possis)
Mailing Address 7031 Kittridge Dr		Date of Receipt O1 31 2014
City	State Zip Code	Transaction ID : SA13A.4142
Fayetteville	NC 28314	Transaction is . GATGA:4142
FEC ID number of contributing federal political committee.	C H4NC07084	Amount of Each Receipt this Period
Name of Employer Retired	Occupation Retired	Personal loan for Political Campaign
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 15000.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State Zip Code	
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General 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
City	State Zip Code	
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optiona	I)	15000.00
TOTAL This Period (last page this line num	ber only)	15000.00

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sol for each categor Detailed Summar	hedule(s) (ry of the	FOR LINE NUMBER: PAGE 9 OF 16 (check only one) X 17
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Chris Andrade for Congress			
Full Name (Last, First, Middle Initial) A. Christopher Alen Andrade			Date of Disbursement
Mailing Address 7031 Kittridge Dr			03 31 2014
City Stat Fayetteville NC Purpose of Disbursement	ze Zip Code 28314		Amount of Each Disbursement this Period
Travel milage 3/8/2014 - 3/31/2014 (1894 miles) Candidate Name Chris Andrade for Congress		002 Category/ Type	Transaction ID : SB17.4150
Senate X Pri	nt For: 2014 mary General ner (specify)		
Full Name (Last, First, Middle Initial) BizCard Express Mailing Address 2703 Raeford Rd.			Date of Disbursement O3 14 2014
City Stat Fayetteville NC Purpose of Disbursement			Amount of Each Disbursement this Period 42.75
Campaign Business Cards Candidate Name Chris Andrade for Congress		006 Category/ Type	Transaction ID : SB17.4127
Senate Pri	nt For: 2014 mary General ner (specify)		
Full Name (Last, First, Middle Initial) Callahan and Rice Insurance			Date of Disbursement
Mailing Address 129 Franklin St.			02 / D / Y Y Y Y O 2 21 2014
City State Fayetteville NC Purpose of Disbursement Insurance of Campaign HQ	Zip Code 28302		Amount of Each Disbursement this Period 470.00
Candidate Name Chris Andrade for Congress		001 Category/ Type	Transaction ID : SB17.4115
Senate Pri	nt For: 2014 mary General mer (specify)		

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

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

S

Image# 14960714809			
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	edule(s) (of the	FOR LINE NUMBER: PAGE 10 OF 16 (check only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			
NAME OF COMMITTEE (In Full) Chris Andrade for Congress			
Full Name (Last, First, Middle Initial) A. Cumberland County Republican Wome	n's Club		Date of Disbursement
Mailing Address PO Box 87062			03 11 2014
City State Fayetteville NC Purpose of Disbursement	Zip Code 28303		Amount of Each Disbursement this Period 36.00
Cumberland County Republican Women's Club Luncheon Candidate Name Chris Andrade for Congress		007 Category/	Transaction ID : SB17.4122
Office Sought: House Disbursement Formation		Туре	
B. Full Name (Last, First, Middle Initial) Florence Rogers Charitable Trust Mailing Address 804 Stamper Rd.			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Fayetteville NC Purpose of Disbursement	Zip Code 28303		Amount of Each Disbursement this Period 2535.71
February and March lease payment. Candidate Name Chris Andrade for Congress		001 Category/ Type	Transaction ID : SB17.4106
Office Sought: House Disbursement Fo		1,700	
Full Name (Last, First, Middle Initial) C. Florence Rogers Charitable Trust			Date of Disbursement
Mailing Address 804 Stamper Rd.			03 / D D / Y Y Y Y Y Y Z Y Z Z Z Z Z Z Z Z Z Z Z
City State Z Fayetteville NC	Zip Code 28303		Amount of Each Disbursement this Period
Purpose of Disbursement Rent for Campaign Headquarters	23333	001	1000.00
Candidate Name Chris Andrade for Congress		Category/ Type	Transaction ID : SB17.4143
Office Sought: Y House Disbursement Fo	pr: 2014		

State:

NC

Senate

District:

President

07

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

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

Primary

Other (specify)

General

S

•••	1.0007 1.0007			
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		- Ose separate scriedule		FOR LINE NUMBER: PAGE 11 OF 16 (check only one) X 17
	ny information copied from such Reports and Statements of commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) Chris Andrade for Congress			
A.				Date of Disbursement
	Mailing Address PO Box 25130 City State	Zip Code		Amount of Each Disbursement this Period
	Fayetteville NC Purpose of Disbursement Wages for february and part of March	28314	001	500.00 Transaction ID : SB17.4128
	Candidate Name Chris Andrade for Congress Office Sought:	r: 2014	Category/ Type	
	Senate President Other (s			
В.	Full Name (Last, First, Middle Initial) North Carolina State Board of Elections Mailing Address 441 North Harrington St.			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Raleigh NC Purpose of Disbursement	Zip Code 27603		Amount of Each Disbursement this Period
	North Carolina State Board of Elections Filing Fee Candidate Name Chris Andrade for Congress		001 Category/ Type	Transaction ID : SB17.4110
	Office Sought: X House Disbursement For	General		
C.	Full Name (Last, First, Middle Initial) Tim Denbo Web Design			Date of Disbursement
	Mailing Address 2178 Walsingham Ct. City State Zip Code			01 31 2014
	Tracy CA 95376 Purpose of Disbursement 1/2 payment for website creation			Amount of Each Disbursement this Period 3000.00
	Candidate Name Chris Andrade for Congress			Transaction ID : SB17.4102
	Office Sought: House Disbursement For	General		

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

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 12 16 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a Detailed Summary Page 20a 20b 20c 21

19b 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) Chris Andrade for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Tim Denbo Web Design 2014 Mailing Address 2178 Walsingham Ct. 02 City State Zip Code Amount of Each Disbursement this Period CA Tracy 95376 Purpose of Disbursement 1/2 payment for website creation 3000.00 004 Transaction ID: SB17.4112 Candidate Name Category/ Chris Andrade for Congress Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President NC State: District: Full Name (Last, First, Middle Initial) Time Warner Cable Date of Disbursement Mailing Address PO Box 77169 03 20 2014 City State Zip Code Amount of Each Disbursement this Period NC 28271 Charlotte 426.62 Purpose of Disbursement Telephone/Internet Bill for Campaign Headquarters 001 Transaction ID: SB17.4133 Candidate Name Category/ Chris Andrade for Congress Type Office Sought: Disbursement For: House 2014 Senate Primary General Other (specify) President State: NC District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City Zip Code State Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 3426.62 SUBTOTAL of Disbursements This Page (optional)..... 13751.08 TOTAL This Period (last page this line number only).....

			FOR LINE	FOR LINE NUMBER: PAGE 13 OF 16		
	CHEDULE B (FEC Form 3)	Use separate schedule(s)	(check only			
T	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		17 18 X 19a 19b 20a 20b 20c 21		
	by information copied from such Reports and Statements may for commercial purposes, other than using the name and a					
/	NAME OF COMMITTEE (In Full)					
/	Chris Andrade for Congress					
۸.	Full Name (Last, First, Middle Initial) First Citizens Bank			of Disbursement		
	Mailing Address PO Box 27131		03			
	City State	Zip Code	Amou	nt of Each Disbursement this Period		
	Raleigh NC	27611		646.36		
	Purpose of Disbursement		Transac	etion ID : SB19A.4179		
	Candidate Name	Cate Ty				
	Office Sought: House Senate President Disbursement For Primary Other (s	: 2014 General				
	State: District: Full Name (Last, First, Middle Initial)					
3.	Ton Harro (Last, Frist, Middle Hittal)		Date	of Disbursement		
	Mailing Address		М "	M / D D / Y Y Y		
	City State	Zip Code	Amou	nt of Each Disbursement this Period		
	Purpose of Disbursement		7 C	. , ,		
	Candidate Name	Cate Tyl				
	Office Sought: House Senate President Disbursement For Primary Other (s	General				
	President Other (s State: District:	ppecity)				
	Full Name (Last, First, Middle Initial)					
Э.				of Disbursement		
	Mailing Address		М	M / D D / Y Y Y		
	City State Zi	p Code	Amou	nt of Each Disbursement this Period		
	Purpose of Disbursement		ᆔᄔ	. , ,		
	Candidate Name	Cate Ty				
	Office Sought: House Senate Primary President Disbursement For Primary Other (s	General				
	State: District:	· · · · · · · · · · · · · · · · · · ·				
S	UBTOTAL of Disbursements This Page (optional)			646.36		

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

1mage# 14960714813 PAGE 14 / 16

: 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC '5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SB19A Transaction ID: SB19A.4179

This was a \$15,000 loan made by the candidate, Christopher Andrade, from First Citizen Bank. The candidate loaned the \$15,000 to the campaign committee. The 3/25/2014 loan payment was made by the campaign committee directly to First Citizens Bank. The payment was not sent to the candidate.

Form/Schedule: Transaction ID:

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

15

×	13a
	13h

16

(check only one) Detailed Summary Page Transaction ID: SC/10.4142 NAME OF COMMITTEE (In Full) Chris Andrade for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Primary Christopher Alen Andrade General Mailing Address Other (specify) 7031 Kittridge Dr State ZIP Code City NC 28314 Fayetteville Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 15000.00 646.36 14353.64 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D31 ^M 01^M ž014 2/1/2016 3.25 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 14353.64 TOTALS This Period (last page in this line only) 14353.64 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Image# 14960714815 16 OF 16

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) Transaction ID : SC/10.4142.SC1		FEC IDENTIFICATION NUMBER
Chris Andrade for Congress		C C00555680
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
Full Name First Citizens Bank		00.00 3.25 %
Mailing Address PO Box 27131	Date Incurred or Established	01 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code Raleigh NC 27611	Date Due Back Ref SC/10.4142	2/1/2016
A. Has loan been restructured? X No Yes	If yes, date originally incurred	M = M / D = D / Y = Y = Y
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:	
C. Are other parties secondarily liable for the debt incur	red? ust be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other No X Yes If yes, specify:_CD secured	of deposit, chattel papers, er similar traditional collateral?	that is the value of this collateral? 15000.00 Does the lender have a perfected security needs in it? No Yes
E. Are any future contributions or future receipts of intercollateral for the loan? No Yes If yes,	rest income, pledged as	What is the estimated value?
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	
Date account established:	Address:	
M M / D D / Y Y Y Y		
	City, State, Zip:	
F. If neither of the types of collateral described above vexceed the loan amount, state the basis upon which		
G. COMMITTEE TREASURER		DATE
Typed Name Brandon Kiehne Signature		04 15 2014
H. Attach a signed copy of the loan agreement.		<u> </u>
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the tare accurate as stated above. II. The loan was made on terms and conditions (in similar extensions of credit to other borrowers of the institution is aware of the requirement that complied with the requirements set forth at 11	ncluding interest rate) no more favor of comparable credit worthiness. a loan must be made on a basis	orable at the time than those imposed for which assures repayment, and has
AUTHORIZED REPRESENTATIVE	[Electronically Filed]	DATE
1 9	tle Bank Officer	01 31 / 2014