

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Restoring Our Community	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00520130 </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Leon Duran	Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 05 / 30 / 2012 </div>
Mailing Address 1199 S. Clifford Avenue	
City State Zip Code Rialto CA 92376	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">67.94</div>
Purpose of Expenditure Employee Salary for Ground Campaign (5/21/12 - 5/27/12)	Category/Type 24E
Name of Federal Candidate Supported or Opposed by Expenditure: Pete Aguilar	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 31 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">196420.54</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : EDT.E.113

Full Name (Last, First, Middle Initial) of Payee Edna Lomeli	Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 05 / 30 / 2012 </div>
Mailing Address 1684 W. Union Street	
City State Zip Code San Bernardino CA 92411	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">148.09</div>
Purpose of Expenditure Employee Salary for Ground Campaign (5/21/12 - 5/27/12)	Category/Type 24E
Name of Federal Candidate Supported or Opposed by Expenditure: Pete Aguilar	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 31 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">196420.54</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : EDT.E.32

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">216.03</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles H. Bell, Jr.

[Electronically Filed]

Date

M M / D D / Y Y Y Y
12 / 04 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Restoring Our Community	FEC IDENTIFICATION NUMBER C C00520130
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Richardo Lomeli		Date MM / DD / YYYY 05 / 30 / 2012
Mailing Address 1685 W. Union Avenue		Amount 158.21
City San Bernardino	State CA	Zip Code 92411
Purpose of Expenditure Employee Salary for Ground Campaign (5/21/12 - 5/27/12)	Category/Type 24E	Transaction ID : EDT.E.33
Name of Federal Candidate Supported or Opposed by Expenditure: Pete Aguilar		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 31 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 196420.54		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		MM / DD / YYYY
City	State	Zip Code
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	158.21
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	374.24

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Charles H. Bell, Jr. [Electronically Filed] Date **12 / 04 / 2012**