

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

Ro for Congress Inc.

ADDRESS (number and street)

PO Box 1398

Check if different than previously reported. (ACC)

Fremont

CA

94538

2. FEC IDENTIFICATION NUMBER ▼

C C00503185

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

17

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 2013

through

M M /

D D /

Y Y Y Y 2013

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 John Mogg

Signature of Treasurer John Mogg

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2013

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

Write or Type Committee Name
Ro for Congress Inc.

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	18075.00	1276882.26
(b) Total Contribution Refunds (from Line 20(d))	39.00	15221.14
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	18036.00	1261661.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	28031.76	167647.32
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	23.62
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	28031.76	167623.70
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1005954.77	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Ro for Congress Inc.

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2013 To: M M / D D / Y Y Y Y 03 / 31 / 2013

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).....	17850.00	1231997.14
(ii) Unitemized.....	225.00	42240.00
(iii) TOTAL of contributions from individuals ▶	18075.00	1274237.14
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	2645.12
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	18075.00	1276882.26
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	23.62
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	328.46	2849.85
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	18403.46	1279755.73

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	28031.76	167647.32
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	39.00	15221.14
(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)).....	39.00	15221.14
21. OTHER DISBURSEMENTS	580.00	90932.50
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	28650.76	273800.96

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1016202.07
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18403.46
25. SUBTOTAL (add Line 23 and Line 24).....	1034605.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	28650.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1005954.77

**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 5 OF 16
	<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)
Ro for Congress Inc.

A. Full Name (Last, First, Middle Initial)
Meenakshi Ahamed

Mailing Address 3001 44th PI NW

City Washington State DC Zip Code 20016-3556

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

Name of Employer Self-Employed Occupation Journalist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2013

Transaction ID : VN8J39H6B64

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Marc Andreessen

Mailing Address PO Box 1707

City Los Altos State CA Zip Code 94023-1707

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

Name of Employer AH Partners Occupation Venture Capitalist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : VN8J39H6AN9

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Laura Arrillaga-Andreessen

Mailing Address PO Box 1707

City Los Altos State CA Zip Code 94023-1707

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

Name of Employer Self-Employed Occupation Philanthropist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : VN8J39H6AQ5

Amount of Each Receipt this Period
2600.00

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

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

7800.00

**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 6 OF 16
	<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)
Ro for Congress Inc.

A. Full Name (Last, First, Middle Initial)
Bharat H Barai

Mailing Address 9906 Twin Creek Blvd

City Munster State IN Zip Code 46321-4223

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : VN8J39H6AR3

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Panna B Barai

Mailing Address 9963 Twin Creek Blvd

City Munster State IN Zip Code 46321-4231

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

Name of Employer Suniti Medical Corporation Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : VN8J39H6AT9

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Katherine Bradley

Mailing Address 2211 30th St NW

City Washington State DC Zip Code 20008-2703

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

Name of Employer CityBridge Foundation Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2013

Transaction ID : VN8J31FASP5

Amount of Each Receipt this Period
1000.00

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

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

6200.00

**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 16
	<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)
Ro for Congress Inc.

A. Full Name (Last, First, Middle Initial)
Allan Maclaren

Mailing Address 1125 McIntosh Creek Dr

City San Jose State CA Zip Code 95120-4119

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 04 / 2013

Transaction ID : VN8J31FBMQ0

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mohnish Pabrai

Mailing Address 34 Cassidy

City Irvine State CA Zip Code 92620-3537

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

Name of Employer Pabrai Investment Funds Occupation Money Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5100.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 29 / 2013

Transaction ID : VN8J39H6BF5

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Nathan Tarcov

Mailing Address 1048 S Plymouth Ct

City Chicago State IL Zip Code 60605-2006

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

Name of Employer University of Chicago Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 04 / 2013

Transaction ID : VN8J31FAXH5

Amount of Each Receipt this Period
1000.00

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

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

3850.00

17850.00

**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 16
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ro for Congress Inc.

Full Name (Last, First, Middle Initial) Wells Fargo Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 31 / 2013	
Mailing Address 295 S Mathilda Ave		Transaction ID : VN8J31FAVX4	
City Sunnyvale	State CA	Zip Code 94086-6067	Amount of Each Receipt this Period 119.16
FEC ID number of contributing federal political committee. C		Interest	
Name of Employer	Occupation		Amount of Each Receipt this Period 2640.55
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2640.55	

Full Name (Last, First, Middle Initial) Wells Fargo Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 28 / 2013	
Mailing Address 295 S Mathilda Ave		Transaction ID : VN8J31FAZ46	
City Sunnyvale	State CA	Zip Code 94086-6067	Amount of Each Receipt this Period 99.25
FEC ID number of contributing federal political committee. C		Interest	
Name of Employer	Occupation		Amount of Each Receipt this Period 2739.80
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2739.80	

Full Name (Last, First, Middle Initial) Wells Fargo Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2013	
Mailing Address 295 S Mathilda Ave		Transaction ID : VN8J39H6BK6	
City Sunnyvale	State CA	Zip Code 94086-6067	Amount of Each Receipt this Period 110.05
FEC ID number of contributing federal political committee. C		Interest	
Name of Employer	Occupation		Amount of Each Receipt this Period 2849.85
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2849.85	

SUBTOTAL of Receipts This Page (optional).....	328.46
TOTAL This Period (last page this line number only).....	328.46

**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 16	
	<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)
Ro for Congress Inc.

Full Name (Last, First, Middle Initial) A. 270 Strategies LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2013
Mailing Address 3024 N Lincoln Ave Unit E		Amount of Each Disbursement this Period 15000.00 Transaction ID : VN7JV8DH30
City Chicago State IL Zip Code 60657-4253	Purpose of Disbursement Campaign Strategy Consulting Services Candidate Name Category/Type 001	
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. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 39.95 Transaction ID : VN7JV8DES7
City San Francisco State CA Zip Code 94128-8999	Purpose of Disbursement Credit Card Processing Fees Candidate Name Category/Type 001	
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. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2013
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 39.95 Transaction ID : VN7JV8DEQ1
City San Francisco State CA Zip Code 94128-8999	Purpose of Disbursement Credit Card Processing Fees Candidate Name Category/Type 001	
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).....	15079.90
TOTAL 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 10 OF 16			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ro for Congress Inc.

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2013
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 39.95
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7JV9H5V29
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. Leah Cowan		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2013
Mailing Address 943 Stanford Ave		Amount of Each Disbursement this Period 5850.00
City Palo Alto	State CA	
Zip Code 94306-1332	Purpose of Disbursement Campaign Strategy Management Services	Transaction ID : VN7JV8DB11
Candidate Name	Category/Type 001	
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. Leah Cowan		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2013
Mailing Address 943 Stanford Ave		Amount of Each Disbursement this Period 3000.00
City Palo Alto	State CA	
Zip Code 94306-1332	Purpose of Disbursement Campaign Strategy Management Services	Transaction ID : VN7JV9H5TW2
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).....	8889.95
TOTAL 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 11 OF 16			
	<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)
Ro for Congress Inc.

Full Name (Last, First, Middle Initial) A. Lorna Dietz		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2013
Mailing Address 1788 19th Ave		Amount of Each Disbursement this Period 2500.00 Transaction ID : VN7JV8DB78
City San Francisco State CA Zip Code 94122-4510	Purpose of Disbursement Communications Consulting Services Candidate Name Category/Type 001	
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. Harland Clarke Checks		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2013
Mailing Address 10931 Laureate Dr		Amount of Each Disbursement this Period 48.97 Transaction ID : VN7JV8DAM0
City San Antonio State TX Zip Code 78249-3312	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
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. Harland Clarke Checks		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2013
Mailing Address 10931 Laureate Dr		Amount of Each Disbursement this Period 193.34 Transaction ID : VN7JV9H5V61
City San Antonio State TX Zip Code 78249-3312	Purpose of Disbursement Office Supplies 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).....	2742.31
TOTAL 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 16			
	<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)
Ro for Congress Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2013
Mailing Address PO Box 7122		Amount of Each Disbursement this Period 709.00
City San Francisco	State CA	
Zip Code 94120-7122	Purpose of Disbursement Tax Payment	Transaction ID : VN7JV9H5VA3
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. Steve Spinner		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 1314 Cloud Ave		Amount of Each Disbursement this Period 261.60
City Menlo Park	State CA	
Zip Code 94025-6048	Purpose of Disbursement Reimbs - Travel	Transaction ID : VN7JV8DA36
Candidate Name	Category/ Type 001	
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. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 77 W Wacker Dr Ste MEZZ		Amount of Each Disbursement this Period 261.60
City Chicago	State IL	
Zip Code 60601-1732	Purpose of Disbursement Travel	Transaction ID : VN7JV9H8WV3
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)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	970.60
TOTAL 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 16			
	<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)
Ro for Congress Inc.

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2013
Mailing Address 295 S Mathilda Ave		Amount of Each Disbursement this Period 0.21 Transaction ID : VN7JV8DCS3
City Sunnyvale State CA Zip Code 94086-6067	Purpose of Disbursement Credit Card Processing Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Wells Fargo Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2013
Mailing Address 295 S Mathilda Ave		Amount of Each Disbursement this Period 69.10 Transaction ID : VN7JV8DCW7
City Sunnyvale State CA Zip Code 94086-6067	Purpose of Disbursement Credit Card Processing Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Wells Fargo Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2013
Mailing Address 295 S Mathilda Ave		Amount of Each Disbursement this Period 0.76 Transaction ID : VN7JV8DCX5
City Sunnyvale State CA Zip Code 94086-6067	Purpose of Disbursement Credit Card Processing Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	70.07
TOTAL 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 14 OF 16			
	<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)
Ro for Congress Inc.

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2013
Mailing Address 295 S Mathilda Ave		Amount of Each Disbursement this Period 94.48
City Sunnyvale State CA Zip Code 94086-6067	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type 001	Transaction ID : VN7JV8DCM4
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. Wells Fargo Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2013
Mailing Address 295 S Mathilda Ave		Amount of Each Disbursement this Period 92.54
City Sunnyvale State CA Zip Code 94086-6067	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : VN7JV9H5V37
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. Wells Fargo Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2013
Mailing Address 295 S Mathilda Ave		Amount of Each Disbursement this Period 38.51
City Sunnyvale State CA Zip Code 94086-6067	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : VN7JV9H5V45
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).....	225.53
TOTAL 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 15 OF 16	
	<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)
Ro for Congress Inc.

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2013
Mailing Address 295 S Mathilda Ave		Amount of Each Disbursement this Period 3.41
City Sunnyvale State CA Zip Code 94086-6067	Purpose of Disbursement Credit Card Processing Fees 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)		Transaction ID : VN7JV9H5V53
State: _____ District: _____		

Full Name (Last, First, Middle Initial) 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 Category/Type	
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) C.		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 Category/Type	
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: _____		

SUBTOTAL of Disbursements This Page (optional)	3.41
TOTAL This Period (last page this line number only)	27981.77

**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 16 OF 16	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Ro for Congress Inc.

Full Name (Last, First, Middle Initial) A. Fremont Education Foundation		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2013
Mailing Address 39120 Argonaut Way # 381		Amount of Each Disbursement this Period 580.00
City Fremont State CA Zip Code 94538-1304	Purpose of Disbursement Donation	Transaction ID : VN7JV8DFJ5
Candidate Name	Category/Type 012	
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.		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	Category/Type	
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) C.		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	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	580.00
TOTAL This Period (last page this line number only).....	580.00