

C

FEC FORM 3P

REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

RECEIVED

2012 OCT 23 PM 12:02

Office Use Only

FEC MAIL CENTER

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

SANTA CLAUS FOR PRESIDENT

PO BOX 5592

ADDRESS (number and street)

Check if different than previously reported. (ACC)

INCLINE VILLAGE NV 89450-5592

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C00529331

3. THIS REPORT IS FOR Primary or General

4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

April 15 (Q1) [X] October 15 (Q3)
July 15 (Q2) [ ] January 31 Year-End Report (YE) [ ]

Feb 20 (M2) [ ] May 20 (M5) [ ] Aug 20 (M8) [ ] Nov 20 (M11) [ ]
Mar 20 (M3) [ ] Jun 20 (M6) [ ] Sep 20 (M9) [ ] Dec 20 (M12) [ ]
Apr 20 (M4) [ ] Jul 20 (M7) [ ] Oct 20 (M10) [ ] Jan 31 (YE) [ ]

Thirtieth day report following the General Election on

Twelfth day report preceding election on in the State of

Is this Report an Amendment?

yes no

5. Covering Period

09 / 31 / 2012

through

10 / 15 / 2012

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

SANTA CLAUS

Signature of Treasurer

Santa Claus

Date

10 / 17 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Office Use Only

12030924853

Write or Type Committee Name

SANTA CLAUS FOR PRESIDENT

Report Covering the Period:

From:

09 / 31 / 2012

To:

10 / 15 / 2012

SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	0
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3) .....	18000
8. SUBTOTAL (Lines 6 and 7) .....	18000
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	16784
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8) .....	1216
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	0
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	0
13. EXPENDITURES SUBJECT TO LIMITATION .....	0

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	18000
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) .....	16784

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**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 03/2011)

of Receipts

Page 3

NAME OF COMMITTEE (in Full)

SANTA CLAUS FOR PRESIDENT

Report Covering the Period:

From:

**MM** / **DD** / **YYYY**  
**09** / **31** / **2012**

To:

**MM** / **DD** / **YYYY**  
**10** / **15** / **2012**

**I. RECEIPTS**

**COLUMN A  
Total This Period**

**COLUMN B  
Election Cycle-to-Date**

16. FEDERAL FUNDS (Itemize on Schedule A-P).....	0	0
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized .....	1,100.00	1,100.00
(ii) unitemized .....	0	0
(iii) Total contributions .....	1,100.00	1,100.00
(b) Political Party Committees.....	0	0
(c) Other Political Committees .....	0	0
(d) The Candidate.....	700.00	700.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d)) .....	1,800.00	1,800.00
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0	0
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate.....	0	0
(b) Other Loans.....	0	0
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....	0	0
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating .....	0	0
(b) Fundraising.....	0	0
(c) Legal and Accounting .....	0	0
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c)) .....	0	0
21. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	0
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21) .....	1,800.00	1,800.00

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**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

Page 4

NAME OF COMMITTEE (in Full)

SANTA CLAUS FOR PRESIDENT

Report Covering the Period: From: 

MM	DD	YY
09	31	2012

 To: 

MM	DD	YY
10	15	2012

**II. DISBURSEMENTS**

**COLUMN A  
Total This Period**

**COLUMN B  
Election Cycle-to-Date**

23. OPERATING EXPENDITURES.....	16784	16784
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0	0
25. FUNDRAISING DISBURSEMENTS.....	0	0
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0	0
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0	0
(b) Other Repayments.....	0	0
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0	0
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees.....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c)).....	0	0
29. OTHER DISBURSEMENTS.....	0	0
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29).....	16784	16784

**III. CONTRIBUTED ITEMS  
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List).....	0	0
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**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 10

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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

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)

SANTA CLAUZ FOR PRESIDENT

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

CLAUS, SANTA

Mailing Address

PO Box 5592

City

INLIFE VILLAGE NV 89450

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

PRESIDENTIAL CANDIDATE

Receipt For:

Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

7000

Date of Receipt

MM / DD / YYYY  
09 / 25 / 2012

Amount of Each Receipt this Period

7000

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

CIBAL, LAURIE

Mailing Address

5810 HAZZARD BLUFF TERRACE

City

MILITARY VA 23112

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

BRUNUS

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

10000

Date of Receipt

MM / DD / YYYY  
09 / 10 / 2012

Amount of Each Receipt this Period

10000

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

DEGESAR, JAMES

Mailing Address

2390 EL CAMINO REAL

City

PAID AUTO CA 94306

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

FAMILY

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

1000

Date of Receipt

MM / DD / YYYY  
09 / 22 / 2012

Amount of Each Receipt this Period

1000

Subtotal Of Receipts This Page (optional).....

18000

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

18000

12030924857

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 10

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

SANTA CLAUS FOR PRESIDENT

Full Name (Last, First, Middle Initial)

A. VOCLUS / PAWEB

Mailing Address

5160 INDUSTRIAL PLACE #107

City

FELDPALE

State

WA

Zip Code

98248

Purpose of Disbursement

PRESS RELEASE

Candidate Name

SANTA CLAUS

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM/DD/YYYY  
10/01/2012

Amount of Each Disbursement this Period

159.00

Full Name (Last, First, Middle Initial)

B. WEPAW

Mailing Address

380 PORTAGE AVENUE

City

PAID AUTO CA 94306

State

Zip Code

Purpose of Disbursement

DONATION PROFESSIONAL FEE

Candidate Name

SANTA CLAUS

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM/DD/YYYY  
09/28/2012

Amount of Each Disbursement this Period

884

Full Name (Last, First, Middle Initial)

C. X

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM/DD/YYYY

Amount of Each Disbursement this Period

Subtotal Of Receipts This Page (optional).....

16784

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

16784

12030924858

**SCHEDULE C-P  
LOANS**

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

PAGE 7 OF 10

FOR LINE NUMBER:  19a  19b  
(check only one)

NAME OF COMMITTEE (In Full)

SANTA CLARA FOR PRESIDENT

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

NONE

Election:

- Primary  
 General  
 Other (specify) ▼

Mailing Address

City State ZIP Code

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

**TERMS**

Date Incurred:  /  /  Date Due:  /  /  Interest Rate:  % (apr) Secured:  Yes  No

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

1. Full Name (Last, First, Middle Initial) <u>NONE</u>	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

Subtotal Of Receipts This Page (optional).....▶

Total This Period (last page this line number only).....▶

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

12030924859

**SCHEDULE D-P**  
**DEBTS AND OBLIGATIONS (Excluding Loans)**

(Use separate schedule(s) for each numbered line)

PAGE 2 OF 10

FOR LINE NUMBER: 11  
 (check only one) 12

NAME OF COMMITTEE (In Full)

SANTA CLAWS FX PRESIDENT

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

NONE

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

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) .....
- 2) TOTALS This Period (last page this line number only) .....
- 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....
- 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) .....

0  
0  
0  
0

12030924860



9/10 *[Signature]*

Schedule C-P-1  
Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

### LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary from Information  
found on Page \_\_\_ of Schedule C-P

NAME OF COMMITTEE (in full, type or print)

FEC IDENTIFICATION NUMBER

C 00528331

SANTA CLAUS FOR PRESIDENT

FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER)

NONE

CITY STATE ZIP CODE

AMOUNT OF LOAN

INTEREST RATE (APR)

%

DATE INCURRED OR ESTABLISHED

MM / DD / YYYY

DATE DUE

MM / DD / YYYY

A. Has loan been restructured?

No  Yes

If yes, date originally incurred:

MM / DD / YYYY

B. If line of credit:

Amount of this draw

Total outstanding balance

C. Are other parties secondarily liable for the debt incurred?

No  Yes

(Endorsers and guarantors must be reported on Schedule C-P)

D. Are ANY of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?

No  Yes

If yes, specify:

What is the value of this collateral:

Does the lender have a perfected security interest in it?

No  Yes

E. Are any future contributions or future receipts of interest income, or future receipts of public financing pledged as collateral for this loan?

No  Yes

If yes, specify:

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established:

MM / DD / YYYY

Location of account:

Date debtor authorized the Secretary of the U.S. Treasury to make direct deposits of public financing payments to the depository account:

MM / DD / YYYY

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and demonstrate that it assures repayment.

12030924861

10/10

G. Type or Print Name of Committee Treasurer

SANTA CLAUS

Signature of Treasurer SANTA CLAUS

Date 10 / 10 / 2012

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION: NOPE

- 1. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- 2. The loan was made on terms and conditions (including interest rate) no more favorable at the time that those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- 3. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth in 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

Type or Print Name of Authorized Representativ

Title

Signature of Authorized Representative

Date

12030924862

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)  
10/18/12

USPS Priority Mail Postmarked  
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*Jim W*  
PREPARER  
(3/2005)

10/23/12  
DATE PREPARED

12030924863