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REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED

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FURIN 3	For An	Authorized C	ommittee		FFC	Oddfor Use Onty (1 T C C)
1. NAME OF COMMITTEE	TYPE OR PR	INT ▼	Example: If typin over the lines.	ng, type	12FE4M5	and the same of th
Friend	s of Cath	YJohns	on Per	rdlet	Lon	
	a a 6 a C			1 1 1	1111	
ADDRESS (number	and street)	0 +5hil	O.h. Co.	4.7-1	1111	
. Check if	different #201			111	1111	
than prev reported.		eli			mpi 2	0.7.08
2. FEC IDENTII	FICATION NUMBER \	CITY 4	\		STATE	ZIP CODE A STATE ▼ DISTRICT
C 0.0.5	50069.4	3. IS THIS REPORT	(N)	OR	AMENDE (A)	ı
4. TYPE OF R	REPORT (Choose One)	(b) 12-Day F	PRE-Election Rep	ort for the:		·
(a) Quarterly	Reports:		iong .	, g	Consest (10	D. D
April	15 Quarterly Report (Q1)		Primary (12F		General (12	· Managara
July	15 Quarterly Report (Q2)		Convention	(12C)	Special (12	S)
Octo	ber 15 Quarterly Report (Q3)	Election	on M M	/ D D /		in the State of
Janu	ary 31 Year-End Report (YE)	(c) 30-Day I	POST-Election Re	port for the:		
			General (300	a) [Runoff (30F	R) Special (30S)
Term	ination Report (TER)	Election	on M M	/ D D /	Y * Y * Y	in the State of
5. Covering Perio	od [38]	20.17	through	1.6]′[[3]′[28 I I
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 Michael & Monge / Other Tokus Tokus Complete.						
Type or Print Name of Treasurer Michele Moore (a Fau John & M Fau Leven						
Signature of Treasurer Addy Music Lewiller Date Date Date						
NOTE: Submission	of false, erroneous, vincom	plete information n	nay subject the pe	rson signing f	this Report to the	penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

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	SUMMARY PAGE
FC Form 3 (Revised 02/2003)	of Receipts and Disbursemen

		FEC Form 3 (Revised 02/2003)	of Receipts and Disbursen	nents		Page 2
	Write o	or Type Committee Name	Tehnson Pendleton	J .		
ı	Report	Covering the Period: From:	08 · 17 · 261.)	То:	7.0 15	2à//
			COLUMN A This Period		COLUMN Election Cycle-t	
6.	Net	Contributions (other than loans)				
	(a)	Total Contributions (other than loans) (from Line 11(e)).			time the second	
	(b)	Total Contribution Refunds (from Line 20(d))			aggeria antigramente granten agranten agranten agranten arregione en experimente de la compansa de la compansa	
	(c)	Net Contributions (other than loans, (subtract Line 6(b) from Line 6(a))	€		agumus agus ann agus an agus a	
7.	Net	Operating Expenditures	_			
	(a)	Total Operating Expenditures (from Line 17)	47	272		
	·(b)	Total Offsets to Operating Expenditures (from Line 14)				
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	40	2.7.2		
8.		th on Hand at Close of orting Period (from Line 27)				
9.	the	ots and Obligations Owed TO Committee (Itemize all on ledule C and/or Schedule D)			·	٠
10	the	ots and Obligations Owed BY Committee (Itemize all on edule 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

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16. TOTAL RECEIPTS (add Lines

FE5AN018

11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	4.72.7.2	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate		
	(b) Of All Other Loans(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))		
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees		
	(b) Political Party Committees(c) Other Political Committees (such as PACs)		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))		
21.	OTHER DISBURSEMENTS		
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	47279	
_	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	5.76
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	
25.	SUBTOTAL (add Line 23 and Line 24)		5.46
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	4.7.272
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		5.7.6

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE OF (check only one)

11a 11b 11c 11d

12 13a 13b 14 11

	Detailed Summary Page	12 13a 13b 14 15							
Any information copied from such Reports and S or for commercial purposes, other than using the	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.								
	Friends of Cathe Johnson Kendleton								
Full Name (Last, First, Middle Initial) A. John Sch. Perend Letter Mailing Address City City	State Zip Code 726	Date of Receipt							
FEC ID number of contributing federal political committee.	CIO.05.00.69.4	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) B.		Date of Receipt							
Mailing Address City	State Zip Code	MAM / DAD / ANABANA							
FEC ID number of contributing federal political committee. Name of Employer	C	Amount of Each Receipt this Period							
Receipt For: Primary General Other (specify)	Election Cycle-to-Date								
Full Name (Last, First, Middle Initial)		Date of Receipt							
Mailing Address City	State Zip Code	[] / [] /							
FEC ID number of contributing federal political committee.		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 (optional)									
TOTAL This Period (last page this line number of	only)								

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SC	CHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF (check only one)
T	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	17 18 19a 19b
_			20a 20b 20c 21
	y information copied from such Reports and Statements for nommercial purposes, other than using the name and		
/	NAME OF COMMITTEE (In Full)		
/		sm Pendleton	1
A.	Full Name (Last, First, Middle Initial)	-	Date of Disbursement
٧.			Mam / Dag / Asaasa
	Mailing Address		
	City State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement		
	Candidate Name	Category, Type	,
	Office Sought: House Disbursement Fo	r	
	Senate Primar	y General (specify)	
	State: District:		
.	Full Name (Last, First, Middle Initial)		Date of Disbursement
В.			MªM / DªD / YªYªYªY
	Mailing Address		
	City State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement		
	Candidate Name	Cotoco	
		Category, Type	·
	Office Sought: House Disbursement Fo		
		(specify)	
	State: District: Full Name (Last, First, Middle Initial)		
C.	i un realite (Lest, Filot, Millolle IIIIII)		Date of Disbursement
- .	Mailing Address		Mam \ DaD \ Agasa
	Mailing Address		
	City State 2	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement			
	Candidate Name	Category, Type	,
	Office Sought: House Disbursement Fo	or:	
	Senate Primar President Other	y General (specify)	
	State: District:		
S	SUBTOTAL of Disbursements This Page (optional)		
т	OTAL This Period (last page this line number only)		A R. P. A JUNE D. MIL N. LINE

CHEDULE C (FEC F OANS	Form 3)		Use separate schedule(s) for each category of the Detailed Summæry Page	PAGE OF FOR LINE NUMBER: (check only one) 13a 13b
NAME OF COMMITTEE (In Full)			_	
LOAN SOURCE Full Name	(Last, First, Mic	ddle Initial)	E	lection: Primary General
Mailing Address				Other (specify)
City		State ZIP Coo	ie	
Original Amount of Loan		Cumulative Payment To	Date Balance	Outstanding at Close of This Period
Date Incurred M M / D D / Y List All Endorsers or Guard		Date Due	Interest Rate	Secured: % (apr)
Full Name (Last, First, N		J Eduli Oddio	Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, M	iddle Initial)		Name of Employer	
Mailing Address			Occupation Amount	
City	State	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, M	iddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	Stare	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, M	iddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This	Page (optional).			
TOTALS This Period (last page	in this line only	y)	Parameter Signature	annemen i Stemmer i mentre i Stemmer i S Ngant i sanjan semejana sempara i mengan semegan semegan semegan semegan semegan semegan semegan semegan semeg Nasangan Disan selaman semegan
Carry outstanding balance on	v to LINE 3. Sci	nedule D for this line. If I	no Schedule D. carry forwar	d to appropriate line of Summary

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM I	LENDING INSTITUTIONS	Supplementary for Information found on
Federal Election Commission, Washington, D.C. 20463		Page of Schedule C
NAME OF COMMITTEE (In Fulf)		FEC IDENTIFICATION NUMBER
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR)
Mailing Address	Date Incurred or Established	M M / D O / Y O Y O Y O Y
City State Zip Code	Date Due	
A. Has loan been restructured? No Yes	If yes, date originally incurred	Mam , Dao , Landadad
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:	
C. Are other parties secondarily liable for the debt inc	urred? must be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates stocks, accounts receivable, cash on deposit, or ot No Yes If yes, specify:	s of deposit, chattel papers, ther similar traditional collateral?	Vhat is the value of this collateral? Does the lender have a perfected security needs in it? No Yes
E. Are any future contributions or future receipts of int collateral for the loan? No Yes If yes		What is the estimated value?
A depository account must be established pursuan	Location of account:	
to 11 CFR 100.82(e)(2) and 100.142(e)(2). 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 exceed the loan amount, state the basis upon which		
G. COMMITTEE TREASURER Typed Name Signature		DATE / DEB / YEYEYEY
H. Attach a signed copy of the loan agreement.		
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the are accurate as stated above. II. The loan was made on terms and conditions similar extensions of credit to other borrowers. III. This institution is aware of the requirement the complied with the requirements set forth at 1.	(including interest rate) no more faves of comparable credit worthiness. at a loan must be made on a basis	orable at the time than those imposed for which assures repayment, and has
AUTHORIZED REPRESENTATIVE Typed Name		DATE

Title

Signature

SCHEDULE D (FEC Form 3)		(Use separate PAGE		PAGE OF	
	BTS AND OBLIGATIONS		sch	nedule(s)	FOR LINE NUMBER:
	cluding Loans			or each bered line)	(check only one) 9
_	ME OF COMMITTEE (In Full)				
	A. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of D	ebt (Purpose):
	Mailing Address				
	City State	Zip Code			
	Outstanding Balance Beginning This Period				
	Amount Incurred This Period	Payment This Period		Outstandi	ng Balance at Close of This Period
					Bendands Charles
	B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of D	ebt (Purpose):
	Mailing Address				
	City State	Zip Code			
	Outstanding Release Regioning This Period				
	Outstanding Balance Beginning This Period				
	Amount Incurred This Period	Payment This Period		Outstandi	ng Balance at Close of This Period
					man Daniel and Daniel
	C. Full Name (Last, First, Middle Initial) of Debte	or or Creditor		Nature of D	ebt (Purposa):
	Mailing Address				
	City	State Zip Code			
	Outstanding Balance Beginning This Period	· · · · · · · · · · · · · · · · · · _ ·			
				.	
	Amount Incurred This Period	Payment This Period		Outstandii	ng Balance at Close of This Period
لـــــا					
1)	SUBTOTALS This Period This Page (optional)		>		
2)	TOTALS This Period (last page this line number	r only)	•		
3)	TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	>		
4)	ADD 2) and 3) and carry forward to appropriate	e line of Summary Page (last page or	nly) 🕨		

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Na	Name of Principal Campaign Committee (In Full) Report Covering Period:							
j	From: To:							
	MAM , BAB , AAAAA							
			Committee	Name [·]		(a) Line No. 11(a) Total Contributions From Indiv/Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees	
A								
В	C	olumn Total Last Page O	nly					
		(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans	
	A							
	В	·		·				
		(i) Line No. 13(c) Total Loans	(i) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(f) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees	
	Α							
	в	~					<u> </u>	
	3	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees	
	Α							
	В							
		(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee	
	Α			7				
	В					(
,		(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures				
	Α							
	В							

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. Date of Receipt 10/13/11 **Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** 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 or Postmarked** Other (Specify): 10/13/11

DATE PREPARED