12030773864

FE5AN018

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

20H2ABB day AMII: 26

1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT		ample: If typing er the lines.	g, type	12FE4M5	FEC MAIL CENTER
L	Check if different than previously reported. (ACC)		G. CINNO				£3.0(20-
2.	FEC IDENTIFICATION NU	· ·	CITY 3. IS THIS REPORT	X NEW	ST. OR	AMEND (A)	ZIP CODE A STATE ▼ DISTRICT
4.	TYPE OF REPORT (Che (a) Quarterly Reports: April 15 Quarterly F July 15 Quarterly R October 15 Quarter	Report (Q1)	(b) 12-Day PRE	E-Election Reportment (12P) Convention (1		General (1 Special (12	, , ,
	January 31 Year-En		(c) 30-Day POS	General (30G)		Runoff (30	PR) Special (30S) in the State of
5.	Covering Period $\overset{M}{\mathcal{O}}$	M ' 3 l'	· · · · · · · · · · · · · · · · · · ·				ZO (Z
Sigi	nature of Treasurer TE: Submission of false, erron		e information may	subject the per	Date son signing this	· 34	K' 09' 2012 PL ne penalties of 2 U.S.C. §437g.
1	Office Use	cods, or insomplet	o momation may	Subject the per	Sold Signing the	. rioport to ti	FEC FORM 3

Write or Type Committee Name

of Receipts and Disbursements

ZRA FOR CONGRESS 2012 01 2012 To: Report Covering the Period: From: **COLUMN A COLUMN B This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 14.895.62 14,395.62 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds (from Line 20(d)) (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 5,95311 5.95311 (from Line 17) (b) Total Offsets to Operating Expenditures (from Line 14)..... (c) Net Operating Expenditures 5.9 53.11 5.953.11 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 8,942.51 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

For further information contact:

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

Toll Free 890-424-9530 Local 202-694-1100

Write or Type Committee Name

JESS HERRERA FOR CONGRESS 2012

Report Covering the Period:

12030773866

From:

01 01 2012

To: 03 31 20/2

	I. RECEIPTS	COLUMN Total This P			LUMN B Cycle-to-Da	ate
11. CC	ONTRIBUTIONS (other than loans) FROM:					
(a)	Individuals/Persons Other Than Political Committees					
	(i) Itemized (use Schedule A)	, 6,8	00,00	5	6,80	00.00
	(ii) Unitemized	, 6,0	95.62	,	6.09	15.62
	(iii) TOTAL of contributions from individuals		95,62			75.62
(b)	Political Party Committees	7 7	• •	9	F	3'
(c)	Other Political Committees (such as PACs)	2,0	0,00	7	200	0000
(d) (e)		, ,	•	7	Ĭ.	
	(add Lines 11(a)(iii), (b), (c), and (d))	, /4,3	95.62	, /	4.89	5,62
	NANSFERS FROM OTHER UTHORIZED COMMITTEES	, ,	•	5	· ,	
13. LC (a)	OANS: Made er Guaranteed by the Candidate	, , , , , , , , , , , , , , , , , , ,		,	,	
	All Other Loans	, ,	•	,	,	•
\- /	(add Lines 13(a) and (b))	, ,		,	,	•
	FFSETS TO OPERATING (PENDITURES					
(R	efundis, Rebates, etc.)	, ,	•	,	7	•
	THER RECEIPTS ividends, Interest, etc.)	, ,	•	,	,	
11	OTAL RECEIPTS (add Lines (e), 12, 13(c), 14, and 15) arry Total to Line 24, page 4)	, 14,e	95.62	· ,	14,89	7562

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

COLUMN A COLUMN B II. DISBURSEMENTS Total This Period Election Cycle-to-Date 2953.11 2953.11 17. OPERATING EXPENDITURES..... 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 5.953.11 5,953.11 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...... 14,895.62 25. SUBTOTAL (add Line 23 and Line 24)...... 5.953.11 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 8,942.51 (subtract Line 26 from Line 25).....

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SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE OF Use separate schedule(s) for each category of the

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		minimized to solicit contributions from such comm
NAME OF COMMITTEE (In Fuil)		
	- Carrie	2000
Full Name (last First Middle Initial)	2 G3/C - 2007/	E33 2012
Full Name (Last, First, Middle Initial)	I Was share yours ?	Politica Action Fund
Mailing Address		Date of Receipt
1188 FRANKLIN	State Zip Code	03/21/2012
City	State Zip Code	
San Trancisco	CA 94109	
FEC ID number of contributing federal political committee.	C 00176214	Amount of Each Receipt this Period
Name of Employer	Occupation	d x
		<u>\$2,000 × </u>
Receipt For:	Election Cycle-to-Date	1
Primary General Other (specify)	4 1 - XX	1
ii Outer (specify)	\$ 2,000	
Full Name (Last, First, Middle Initial)		
		Date of Receipt
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City	State Zip Code	
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federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	
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Reseipt For:	Election Cycle-to-Date	
Primary General	• • •	
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City	State Zip Code	
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FEC ID number of contributing		
federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
	•	
Receipt For:	Election Cycle-to-Date	
Primary General		
Other (specify)		
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NAME OF COMMITTEE (In Full)	on Congres	s 2012
Mailing Address		Date of Receipt
City State	Zip Code 93030-3136	
federal political committee. Name of Employer Occupation	8	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify)	Shoremun Cycle-to-Date	
	A DE ST.	Date of Receipt 03/02/2012
FEC ID number of contributing federal political committee.	93036-1824	Amount of Each Receipt this Period
Reneipt For: Primary General Other (specify) Occupation Occupati	Shoreman Sycle-to-Date	\$250.00
Full Name (Last, First, Middle Initial) Mailing Address City State	15 5 T Zip Code	Date of Receipt 7012
FEC ID number of contributing federal political committee.	93036 - 1824	Amount of Each Receipt this Period
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	tion y Council dyclate-Date \$ 500.00	\$500.00
Full Name (Last, First, Middle Initial) ELZINGA RICCI Mailing Address 1702 ENE RA City State	Lel Isle Wy Zip Code 93035	Date of Receipt 02/16/2012
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Full Name (Last, First, Middle Initial) F PL'SKY Mic Mailing Address N 5706 Count City State S POONER WI		Date of Receipt 03/04/2012
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Full Name (Last, First, Middle Initial) Mailing Address City	Tess Herrera	. For Congres	s 2012
State 2p Code 9304/ FEC ID number of contributing federal political committee. Name of Employer Cocupation Cocupati	T. HANNA 1) E (B.	Date of Receipt
Fecility Contributing General Occupation Full Name (Last, First, Middle Initial) For Innary General Occupation Full Name (Last, First, Middle Initial) Figure of Employer For Innary General Occupation State Zip Code A PI 501 M. Character Ca 930 41 FEC ID number of contributing federal political committee. Name of Employer Receipt Foc: A Primary General Occupation Character Ca 930 41 Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Gurrand Ca Good Occupation Full Name (Last, First, Middle Initial) Gurrand Ca Good Occupation Full Name (Last, First, Middle Initial) Gurrand Ca Good Occupation Full Name (Last, First, Middle Initial) Gurrand Ca Good Occupation Given Ca Good Occupation Full Name (Last, First, Middle Initial) Gurrand Ca Good Occupation Gurrand Ca Good Occupation Gurrand Ca Good Occupation Gurrand Ca Good Occupation Full Name (Last, First, Middle Initial) Gurrand Ca Good Occupation Gurrand Ca Good Occupation Gurrand Ca Good Occupation Gurrand Ca Good Occupation Full Name (Last, First, Middle Initial) Gurrand Ca Good Occupation Gurran	APT 59 PORT HU	State Zin Code e	02/21/2012
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Other (specify) Full Name (Last, First, Middle Initial) Mailing Address **Y501	Receipt For:	Retized	\$1,500.00
Mailing Address WSO(W. Channel Tsl. Blud City FEC ID number of contributing federal political committee. Name of Employer Full Name (Last, First, Middle Initial) City City City Channel Care Cocupation Charles Care Cocupation Cocupation City City City Channel Care Cocupation City	Other (specify)	1,500.00	
City State Zip Code State Zip Code APT 59 Pert Huser His CA 930 41 FEC ID number of contributing federal political committee. Name of Employer Receipt Foc X Primary General Other (specify) Full Name (Last, First, Middle Initial) Gaure of Carrollar State Zip Code Amount of Each Receipt this Period Amount of Each Receipt this Period Amount of Each Receipt this Period Date of Receipt The City Carrollar Carro	1 HANNA)	e (B	-
FEC ID number of contributing federal political committee. Name of Employer Receipt Foc: X Primary General Other (specify) Full Name (Last, First, Middle Initial) Guy Good Good Good Good Good Good Good Goo	4501 W. Chan	State Zip Code	03/27/2012
Receipt For: X Primary General Other (specify) Full Name (Last, First, Middle Initial) Gurand A Edward W. Malling Address HIOI Romany Zip Code City State Zip Code 9 30 35 - 29 27 FEC ID number of contributing federal political committee. Name of Employer Receipt For: X Primary General Other (specify) Election Cycle-to-Date SUBTOTAL of Receipts This Page (optional)	FEC ID number of contributing		Amount of Each Receipt this Period
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Malling Address HID I Roman Dr. City State Zip Code Oxumase CA 93035-2927 FEC ID number of contributing federal political committee. C Name of Employer Occupation TZ = Tire = d Receipt For: XPrimary Other (specify) Subtrotal of Receipts This Page (optional) Subtrotal of Receipts This Page (optional)	Gurrola	Edward W.	
FEC ID number of contributing federal political committee. Name of Employer Occupation TZ = Tired For: Election Cycle-to-Date Formary General Formary General Formary General Formary Formary	Mailing Address H101 Bena	State Zip Code	03/29/2012
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	Primary General	,	
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)	FOR CONTRES	is 2012
Full Name (Last, First, Middle Initial) FCYNA Mailing Address	nn K	Date of Receipt
	State Zip Code	3/31/2012
PPO ID	C	Amount of Each Receipt this Period
	coupation Reliable	250.00
Primary General Other (specify)	ection Cycle-to-Date \$ 250.00	
Full Name (Last, First, Middle Initial) Mailing Address	ANE L.	Date of Receipt
City OXNARA	State Zip Code	03/31/2012
FEC ID number of contributing	<u>CA </u>	Amount of Each Receipt this Period
	Retired	\$ 250.00
Receipt For: Primary General Other (specify)	Election Cycle-to-Date *** 2 50.00	
Full Name (Last, First, Middle Initial)	Sally 3	Date of Receipt
Mailing Address 4933 Octo	State Zip Code CA 93035	03/09/2012
FEC ID number of contributing federal political committee.	C .	Amount of Each Receipt this Period
,	Decupation Retired	\$ 250.00
Receipt For: Primary General Other (specify)	Election Cycle-to-Date 250,00	
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SCHEDULE A (FEC Form 3)

Use separate schedule(s)

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NAME OF COMMITTEE (In Full)		
Full Name (Last, First, Middle Initial)	GOR CONTRES	5 2012
Mailing Address	hony C	Date of Receipt
2534 OCEANS State Port Hueneme	CA 93041	32/16/25/2
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer Occup	Retired	\$ 250.00
Receipt For: ———————————————————————————————————	on Cycle-to-Date \$ 150.00	
	NZY	Date of Receipt
City CAMARILLO CA	T T T T T T T T T T T T T T T T T T T	03/29/2012
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
	ngshoreman	\$500.00
Primary General Other (specify)	500.00	
	S &	Date of Receipt
Mailing Address	e Zip Code	03/28/2012
FEC ID number of contributing federal political committee.	93030	Amount of Each Receipt this Period
	pation	
	on Cycle-to-Date	\$250.00
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page this line number only)		\$ 6,800.00

	SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the mame and a	Use separate schedule(s) for each category of the Detailed Surnmary Page	
M W W	NAME OF COMMITTEE (In Full) Tess Herror Full Name (Last, First, Middle Initial) A. Bowen De Mailing Address City City Purpose of Disbursement Candidate Name Tess Herror Office Sought: House Disbursement For:	ZIP Code Category/ Type	Date of Disbursement M M / D D / Y Y Y O 3 05 ZO 1 Z Amount of Each Disbursement this Period 1:695.34
120307	Candidate Name Candidate Name Candidate Name Disbursement For Senate Primary President Other (s	Zip Code 7 3 00 3 Handon Tope General	Date of Disbursement M M / D D / Z P / Z Amount of Each Disbursement this Period 7 3,500.00
	State: CA District: 26 Full Name (Last, First, Middle Initial) C. VELLA COUNTY E Mailing Address City State Zi Purpose of Disbursement Candidate Name TEGS HEXZET F Office Sought: X House Senate Primary President State: CA District: Z6	General	Date of Disbursement M M / D & / ZO / Z Amount of Each Disbursement this Period 3 0.00

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SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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

HEDULE C (FEC F	orm 3)	Use separate schedul		PAGE OF ENUMBER:
ANS		Detailed Summary Pa		nly one) 13
ME OF COMMITTEE (In Full)	455555H	FOR CONTE	?e\$s	2012
LOAN SOURCE Full Name	(Last, First, Middle Initial)	V	Election: Primary	
\mathcal{L}	1/4		General	
Mailing Address			Other (spe	ecify) 🔻
City	State ZII	P Code		
Original Amount of Loan	Cumulative Payme	nt To Date Bala	ance Outstanding	at Close of This Pe
, ,	, ,	; ·	,	,
TERMS Date Incurred	Date	Due Interest Rat	e	Secured:
м м / р / у	Y Y Y M M / D J /	Y Y Y Y	. % (apr	
List All Endorsers or Guara	intors (if any) to Loan Source			163
1. Full Name (Last, First, Mi	iddle Initial)	Name of Employer		
Mailing Address		Occupation		
		Amount		
City	State ZIP Code	Guaranteed Outstanding:	, ,	•
2. Full Name (Last, First, Mic	ddle Initial)	Name of Employer		
	ddle Initial)	Name of Employer Occupation		
2. Full Name (Last, First, Mic	ddle Initial) State ZIP Code			

SCHEDULE C-1 (FEC Form 3)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page _____ of Schedule C

ANAME OF COMMITTEE TO FUIL		T ==					
NAME OF COMMITTEE (In Full)	_	1					JMBER
Jess Herr	= ZL FOR CON	7 ResC	00	57	3	42	ક /
LENDING INSTITUTION (LENDER)	Amount of Loan		ir	nterest	Rate	(APR)
Full Name	3 5	at					%
Mailing Address	Date Incurred or Established	AM M	/ D	D /	Y	Y	Υ Υ
City State Zip Code	Date Due	- M M	/ D	, ,	Y	Y	Υ Υ
A. Has loan been restructured? No Yes	If yes, date originally incurred	M M	/ 0	D /	γ	Y	Υ Υ
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:		5	5		3	
C. Are other parties secondarily liable for the debt incum No Yes (Endorsers and guarantors mu	red? ust be reported on Schedule C.)						
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, regotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?							
No Yes If yes, specify:		Does the le	_	ave a p	perfec	cted s Yes	security
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify:							
A depository account must be established pursuant to 11 CFR 100.8Z(e)(2) and 100.142(e)(2).	Location of account:						
Date account established:	Address:						
M M / D D / Y Y Y	City, State, Zip:						
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 the basis on which it assures repayment.							
G. COMMITTEE TREASURER Typed Name Signature		DATE M M	/ 0	, כו	, A	Y	Y Y
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 to are accurate as stated above. II. The loan was made on terms and conditions (in similar extensions of credit to other borrowers of credit to other borrowers of credit to other borrowers of credit to other borrowers.	ncluding interest rate) no more fa	_	_				
III. This institution is aware of the requirement that complied with the requirements set forth at 11 (a loan must be made on a basis	s which as ing this loa	sures ro n.	epayme	nt, a	nd ha	as
AUTHORIZED REPRESENTARVE		DATE					
Typed Name Signature Tit	tle	_ M M	/ D	D 1	Y	Y	Y Y
-		1					

SCHEDULE D (FEC Form 3)		(Use separate	PAGE OF
DEBTS AND OBLIGATIONS		schedule(s)	FOR LINE NUMBER:
Excluding Loans		for each numbered line)	(check only one) 9
			<u> </u>
NAME OF COMMITTEE (In Full) A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	TOR COMER	ess 7	217
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	Debt (Purpose):
NIL			
Mailing Address			
City State Zip Code	9		
Outstanding Balance Beginning This Period			* · · · · · · · · · · · · · · · · · ·
, , ,			
Amount Incurred This Period Pa	ayment This Period	Outstandi	ng Balance at Close of This Period
, , , ,	,		, ,
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	Pebt (Purpose):
Mailing Address			
City State Zip Code	9		
Outstanding Balance Beginning This Period			
, , , Amount Incurred This Period P.		Outstand	ing Polongo at Close of This Bories
Amount incurred This Period P	ayment This Period	Outstand	ing Balance at Close of This Perioc
, , ,	y .		, ,
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	Debt (Purpose):
Mailing Address			
City State	Zip Code		
Outstanding Balance Beginning This Period		l	
Amount Incurred This Period P	ayment This Period	Outstand	ing 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)		

ADD 2) and 3) and carry forward to appropriato line of Summary Page (last page only)

Federal Election Co ENVELOPE REPLACEMENT PAGE FO The FEC added this page to the end of this fil	OR INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature	gnature 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	Date of Receipt on Office
Received from Senate Public Records Office	Date of Receipt e
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Chus	4/13/12
PREPARER	DATE PREPARED

(3/2005)