10/13/2015 16 : 57

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#### FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For An A	uthor	ized Com	mittee			Office	Use Only
NAME OF     COMMITTEE (in	full)	TYPE OR PRIN	Г₩		ample: If typin er the lines.	g, type	12FE4M5	5	
Dr. Brad Allen	for Cong	gress							1
		PO Box 88							
ADDRESS (number ar	nd street)								
Check if dit	ferent								
than previous reported. (A		Summerland					CA L	93067	
2. <b>FEC IDENTIFIC</b>	CATION NU	JMBER ▼		CITY A			STATE A		ZIP CODE
00055744	24	-	2	IS THIS	NEW		AMENE	DED	STATE ▼ DISTRICT
C C0055712	24			REPORT	× NEW	OR	(A)		CA 24
4. TYPE OF RE	•	oose One)	(b) 1	2-Day PRE	Election Repo	ort for the:			
(a) Quarterly R	eports:				Primary (12P)	)	General (*	12G)	Runoff (12R)
April 15	Quarterly F	Report (Q1)		П	Convention (	12C)	Special (1	25)	
July 15	Quarterly R	eport (Q2)			Convention (	.20)	Operation (1		
X Octobe	r 15 Quarter	ly Report (Q3)		Election on	M M /	D D	Y Y Y Y		in the State of
January	/ 31 Year-En	d Report (YE)	(c) 3	B0-Day <b>POS</b>	<b>r</b> -Election Rep	ort for the	):		
					General (30G	)	Runoff (30	OR)	Special (30S)
Termina	ition Report	(TER)			M M /	D D	/ Y Y Y Y	1	in the
				Election on					State of
5. Covering Period	M 07	M / D D /		015 Y	through	09	/ D D /		2015
I certify that I have e	examined thi	is Report and to	the be	est of my kn	owledge and l	belief it is	true, correct and	d com	olete.
Type or Print Name	of Treasurer	Bryan Burch							
Signature of Treasure	er <u>Brya</u>	n Burch			[Electronically 1	Filed]	Date 10	/	13 / 2015
NOTE: Submission of	false, errone	eous, or incomple	ete infor	mation may s	subject the per	son signing	this Report to t	he pen	alties of 2 U.S.C. §437g.
Office				-					
Use Only									EC FORM 3 Revised 02/2003)

#### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 11

Write or Type Committee Name

#### Dr. Brad Allen for Congress

		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))	0.00	40521.00
	(b) Total Contribution Refunds (from Line 20(d))	0.00	2600.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	37921.00
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	0.00	131817.23
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	131817.23
8.	Cash on Hand at Close of Reporting Period (from Line 27)	103.77	
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	103780.00	

#### 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)

PAGE 3 / 11

Write or Type Committee Name

#### Dr. Brad Allen for Congress

Report Covering the Period: From: 07 01 2015 To: M M 7 09 2015

	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)	0.00	40521.00		
	(ii) Unitemized	0.00	0.00		
	(iii) TOTAL of contributions from individuals	0.00	40521.00		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	0.00		
	(d) The Candidate	0.00	0.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	40521.00		
	TRANSFERS FROM OTHER	0.00	0.00		
	AUTHORIZED COMMITTEES	0.00	0.00		
	LOANS:  (a) Made or Guaranteed by the				
	Candidate	0.00	0.00		
	(b) All Other Loans	0.00	94000.00		
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	94000.00		
	OFFSETS TO OPERATING				
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00		
	OTHER RECEIPTS	0.00	2.22		
	(Dividends, Interest, etc.)	0.00	0.00		
	<b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	134521.00		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 11

		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17.	OPI	ERATING EXPENDITURES	0.00	131817.23	
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00	
19.	LOA	AN 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.	REF	FUNDS OF CONTRIBUTIONS TO:			
	(a)	Individuals/Persons Other Than Political Committees	0.00	2600.00	
	(b)	Political Party Committees	0.00	0.00	
	(c)	Other Political Committees (such as PACs)	0.00	0.00	
	(d)	TOTAL CONTRIBUTION REFUNDS			
	(u)	(add Lines 20(a), (b), and (c))	0.00	2600.00	
21.	OTI	HER DISBURSEMENTS	0.00	0.00	
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	0.00	134417.23	
		III. CASH SUM	MMARY		
23.	CAS	SH ON HAND AT BEGINNING OF REPORT	TING PERIOD	103.77	
24	TO	TAL RECEIPTS THIS PERIOD (from Line 16	3, page 3)	0.00	
25.	SUI	BTOTAL (add Line 23 and Line 24)		103.77	
26.	TO	TAL DISBURSEMENTS THIS PERIOD (from	ı Line 22)	0.00	
		SH ON HAND AT CLOSE OF REPORTING			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

	13a
X	13b

DANS			Detailed Summary Pa		(check only on	e)	_	13a 13b
AME OF COMMITTEE (In Full)  Or. Brad Allen for Congre	200		Transa	action I	D : PAYC97			
LOAN SOURCE Full Name (La Brad Allen - Personal F	ast, First, Middle	e Initial)			etion: 2014 Primary			
Mailing Address PO Box 88					General Other (specify)	▼		
City	St	ate ZIP Cod	de					
Summerland	(	CA 93067						
Original Amount of Loan	C	Cumulative Payment To	Date Ba	lance C	Outstanding at C	lose of Th	is P	<sup>3</sup> eriod
2	0000.00	9 9	0.00		, ,	20000	.00	
	M M	Date Due	Interest Ra	_	% (apr)	Secured:	×	No
List All Endorsers or Guaranto  1. Full Name (Last, First, Midd		oan Source	Name of Employer					
•	ne milial)							
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7		- A	]	
2. Full Name (Last, First, Middl	le Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	9		]	
3. Full Name (Last, First, Middl	le Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	,		]	
4. Full Name (Last, First, Middl	le Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	9	-	]	
SUBTOTALS This Period This Pag	ge (optional)		·····		7	20000	.00	
TOTALS This Period (last page in	this line only)				7 7			
Carry outstanding balance only to	LINE 3. Sched	ule D. for this line. If	no Schedule D. carry for	rward t	to appropriate l	ine of Sur	mm	arv.

Use separate schedule(s) for each category of the

FOR

PAGE

R LINE NUMBER:		1
ck only one)		13a
	X	13b

6 OF

DAN5		Detailed Summary Page	(Crieck Only One) X 13b
AME OF COMMITTEE (In Full)		Transactio	on ID : PAYC64
Or. Brad Allen for Congress			
LOAN SOURCE Full Name (Last, First,	Middle Initial)		Election: 2014
Brad Allen - Personal Funds			Primary General
Mailing Address PO Box 88			Other (specify)
City	State ZIP Co	de	
Summerland	CA 93067		
Original Amount of Loan	Cumulative Payment To	Date Balanc	ce Outstanding at Close of This Period
25000.00		0.00	25000.00
TERMS  Date Incurred	Date Due	Interest Rate	Secured:
M 05 M / D 21 D / Y 2014 Y	M M / D D / Y	None O.00	% (apr) Yes No
List All Endorsers or Guarantors (if ar	ny) to Loan Source		100 110
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Stat	e ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Stat	e ZIP Code	Guaranteed	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Stat	e ZIP Code	Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Stat	e ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (option	nal)		25000.00
TOTALS This Period (last page in this line	·		7 7 7
Carry outstanding balance only to LINE 3,	Schodula D. for this line 14	no Schadulo D. come forme	rd to appropriate line of Summer:
Jan y Julistaniumy Dalanice Ully to LINE 3,	Concade D, for this line. If	no ochedule D, carry lorwa	ia to appropriate line of Julillially.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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DAN5		Detailed Summary Page	(crieck only one) X 13b
AME OF COMMITTEE (In Full)		Transaction	on ID : PAYC71
Or. Brad Allen for Congress			
LOAN SOURCE Full Name (Last, First	, Middle Initial)		Election: 2014
Brad Allen - Personal Funds			Primary General
Mailing Address PO Box 88			Other (specify)
City	State ZIP Co	de	
Summerland	CA 93067		
Original Amount of Loan	Cumulative Payment To	Date Balance	ce Outstanding at Close of This Period
11000.00	3	0.00	11000.00
TERMS  Date Incurred	Date Due	Interest Rate	Secured:
M05 <sup>M</sup> / D23 <sup>D</sup> / Y 2014 Y	M M / D D / Y	None O.00	% (apr) Yes No
List All Endorsers or Guarantors (if a	ny) to Loan Source		100 140
1. Full Name (Last, First, Middle Initial		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	te ZIP Code	Guaranteed	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	te ZIP Code	Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	te ZIP Code	Guaranteed Outstanding:	yy
SUBTOTALS This Period This Page (optio	nal)		11000.00
TOTALS This Period (last page in this line			
Carry outstanding balance only to LINE 3	Schedule D for this line If	no Schedule D. corru forms	ard to appropriate line of Summon.
Jan y Judistantining Dalance Unity to LINE 3	, Somedule D, IOI HIIS IIIIE. II	no ochedule D, carry forwa	na to appropriate line of Julillidly.

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

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OANS			Detailed Summary Pa		/ one) 13a X 13b
AME OF COMMITTEE (In Full)			Transa	action ID : PAYC73	
Or. Brad Allen for Congress					
LOAN SOURCE Full Name (Last, F Brad Allen - Personal Fund		itial)		Election: 2014  Primary  General	
Mailing Address PO Box 88				Other (speci	fy) 🔻
City	State	ZIP Co	de		
Summerland	CA	93067			
Original Amount of Loan	Cun	nulative Payment To	Date Ba	lance Outstanding a	at Close of This Period
28000	.00		0.00		28000.00
Date Incurred  M 05 / D27 / Y 2014	Y	Date Due	Interest Ra		Secured:
List All Endorsers or Guarantors (	if any) to Loa	n Source			Yes No
1. Full Name (Last, First, Middle In	itial)		Name of Employer		
Mailing Address			Occupation		
City	State ZIF	<sup>2</sup> Code	Amount Guaranteed Outstanding:	7 7	
2. Full Name (Last, First, Middle Init	tial)		Name of Employer		
Mailing Address			Occupation		
City	State ZIF	<sup>o</sup> Code	Amount Guaranteed Outstanding:	7 7	
3. Full Name (Last, First, Middle Init	tial)		Name of Employer		
Mailing Address			Occupation		
City	State ZIF	<sup>2</sup> Code	Amount Guaranteed Outstanding:	7 7	
4. Full Name (Last, First, Middle Init	tial)		Name of Employer		
Mailing Address			Occupation		
City	State ZIF	<sup>2</sup> Code	Amount Guaranteed Outstanding:	7 7	
SUBTOTALS This Period This Page (o	ptional)		······		28000.00
TOTALS This Period (last page in this	line only)				7
Carry outstanding balance only to LIN	IE 3, Schedule	D, for this line. If	no Schedule D. carry fo	rward to appropria	te line of Summarv.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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	il.
	13a
$\overline{v}$	13h

DANS				ummary Page		<i>′</i> ⊢	13a X 13b
AME OF COMMITTEE (In Full)  Or. Brad Allen for Congress				Transacti	ion ID : PAYC77	<u>'</u>	
LOAN SOURCE Full Name (Last,	First, Middle Initial)				Election: 2014		
Brad Allen - Personal Funds					Primary		
Mailing Address PO Box 88					General Other (specify)	▼	
City	State	ZIP Cod	 e				
Summerland	CA	93067					
Original Amount of Loan	Cumulati	ve Payment To [	Date	Balan	ce Outstanding at	Close of Th	is Perioc
300	0.00	7 7	0.00			3000	.00
TERMS  Date Incurred		Date Due		Interest Rate		Secured:	
M <sub>05</sub> <sup>M</sup> / D <sub>27</sub> <sup>D</sup> / Y Ž014	M M /	D D / Y	Y None	0.00	% (apr)	Yes	X No
List All Endorsers or Guarantors	(if any) to Loan So	ource				163	110
1. Full Name (Last, First, Middle	Initial)		Name of Emp	loyer			
Mailing Address			Occupation				
City	State ZIP Coo	de	Amount Guaranteed Outstanding:		7 7		]
2. Full Name (Last, First, Middle I	nitial)		Name of Emp	loyer			
Mailing Address			Occupation				
City	State ZIP Coo		Amount Guaranteed				1
			Outstanding:		7		
3. Full Name (Last, First, Middle I	nitial)		Name of Emp	loyer			
Mailing Address			Occupation				
City	State ZIP Cod		Amount Guaranteed				1
			Outstanding:		7		
4. Full Name (Last, First, Middle In	nitial)		Name of Emp	loyer			
Mailing Address			Occupation				
City	State ZIP Cod	de	Amount Guaranteed Outstanding:		7 7 7		]
SUBTOTALS This Period This Page	(optional)			<u> </u>		3000	.00
OTALS This Period (last page in thi	s line only)			<b>.</b>	7 7		
Carry outstanding balance only to L	NE 3, Schedule D, fe	or this line. If n	o Schedule D	, carry forwa	ard to appropriate	line of Sur	mmary.

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 10

DANS			Detailed Summary Pa		(check only on	e)	_	13a 13b
IAME OF COMMITTEE (In Full)  Transaction ID : PAYC80  Dr. Brad Allen for Congress						•		
		1 ''' 10		T =:				
Brad Allen - Personal Fu		e initial)		X	tion: 2014 Primary General			
Mailing Address PO Box 88					Other (specify)	•		
City	St	ate ZIP Cod	de					
Summerland		CA 93067						
Original Amount of Loan	(	Cumulative Payment To	Date Bal	lance O	utstanding at C	lose of Th	is P	eriod
7	000.00		0.00		, ,	7000.	.00	
TERMS  Date Incurred		Date Due	Interest Ra	to.		Secured:		
M06 <sup>M</sup> / D02 <sup>D</sup> / Y 201	M M	M / D D / Y	None 0.0	_	% (apr)		X	
List All Endorsers or Guaranto	rs (if any) to L	oan Source				Yes		No
1. Full Name (Last, First, Middl	e Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	7		]	
2. Full Name (Last, First, Middle	Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	-,-		]	
3. Full Name (Last, First, Middle	Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	-		]	
4. Full Name (Last, First, Middle	Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7			]	
SUBTOTALS This Period This Page	e (optional)		·····			7000.	.00	
TOTALS This Period (last page in t	this line only)					94000.	.00	
Carry outstanding balance only to	LINE 3. Sched	ule D. for this line. If	no Schedule D. carry for	rward t	o appropriate li	ne of Sur	nm:	arv.

## SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 11 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

NAME (	OF COMMITTEE	(In Full)		
Dr	Brad A	llen f	or Cor	aress

Dr. Brad Allen for Cong	ress	
A. Full Name (Last, First, Middle Initial) of Debtor Brad Allen - Personal Funds		Nature of Debt (Purpose): Filing Fee
Mailing Address PO Box 88		
City State Summerland	Zip Code CA 93067	
Outstanding Balance Beginning This Period		Transaction ID : PAYD56
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.0	0 1050.00
B. Full Name (Last, First, Middle Initial) of Debtor of Brad Allen - Personal Funds	or Creditor	Nature of Debt (Purpose): Ballot Statement Fees
Mailing Address PO Box 88		
City State Summerland	Zip Code CA 93067	
Outstanding Balance Beginning This Period		Transaction ID : PAYD57
8730.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.0	0 8730.00
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
9 9		
1) SUBTOTALS This Period This Page (optional)		9780.00
2) TOTALS This Period (last page this line number of	9780.00	
3) TOTAL OUTSTANDING LOANS from Schedule C	94000.00	
4) ADD 2) and 3) and carry forward to appropriate I	y) • 103780.00	