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FEC MAIL CENTER

FROM! RAN BHALLA

TO! - FEC

SUB - AMENDED REPORT

PLEASE RECEIVE AMENDED
REPORT.

THANK

Ran Bhalla

6.13.2012

12050822899

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REG MAIL CENTER

6503 Hixson Pike Suite F
Hixson, TN 37343
Voice Mail: (423) 842-4204
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Complete Bookkeeping Service

June 8, 2012

ATTACHED FINANCIAL STATEMENTS PREPARED FOR

RANIT SINGH BHALLA CAMPAIGN ACC

BY

Robert Palmer
ROBERT PALMER, ACCOUNTANT

12030822900



RAMFAR CONGRESS

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

14,145.00

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) ▶

14,145.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

375.56

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

15,080.00

25. SUBTOTAL (add Line 23 and Line 24).....

15,455.56

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

14,145.00

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

1,310.56

12030822901

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	OF
	<input 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) **RON FAR CONGRESS**

A. Full Name (Last, First, Middle Initial) **BHATIA ANIL DR.**

Mailing Address **CHATTANOOGA TN 37421**
City State Zip Code
729 SUNSET MOUNTAIN DR

FEC ID number of contributing federal political committee. **C00519447**

Name of Employer **self** Occupation **MEDICAL DOCTOR**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date

Date of Receipt **02 / 12 / 2012**

Amount of Each Receipt this Period **1,000.00**

B. Full Name (Last, First, Middle Initial) **DR. NEKHIL SMAH**

Mailing Address **2110 COLTWAH RINGGOLD RD**
City State Zip Code
COLTEWAH TN 37363

FEC ID number of contributing federal political committee. **C00519447**

Name of Employer **self** Occupation **DOCTOR**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date

Date of Receipt **02 / 12 / 2012**

Amount of Each Receipt this Period **500.00**

C. Full Name (Last, First, Middle Initial) **VISAY KALHAN**

Mailing Address **1407 HIGH CREST CT**
City State Zip Code
HIXSON TN 37343

FEC ID number of contributing federal political committee. **C00519447**

Name of Employer **self** Occupation **semi Retiree**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date

Date of Receipt **02 / 12 / 2012**

Amount of Each Receipt this Period **101.00**

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

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

1,601.00

12030822902

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

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NAME OF COMMITTEE (In Full)
RAW FOR CONGRESS

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

Mailing Address
1828 RIVER CHASE RD

City
HIXSON State
TN Zip Code
37343

FEC ID number of contributing federal political committee.
C00519447

Name of Employer
Occupation
Retiree

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
02 / 12 / 2012

Amount of Each Receipt this Period
100.00

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

Mailing Address
1202 CONSTITUTION DR.

City
CHATT. State
TN Zip Code
37405

FEC ID number of contributing federal political committee.
C00519447

Name of Employer
self Occupation
Build.

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
02 / 12 / 2012

Amount of Each Receipt this Period
243.00

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

Mailing Address
418 PINE BLUFF DR

City
CHATT. State
TN Zip Code
37412

FEC ID number of contributing federal political committee.
C00519447

Name of Employer
RETIRED Occupation
—

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
02 / 26 / 2012

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....
443.00

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

12030822903

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

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)

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

Mailing Address MISC. CONTRIBUTORS CASE

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee. C

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt MM/DD/YYYY

Amount of Each Receipt this Period 1,450.00

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

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee. C

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt MM/DD/YYYY

Amount of Each Receipt this Period _____

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

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee. C

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt MM/DD/YYYY

Amount of Each Receipt this Period _____

SUBTOTAL of Receipts This Page (optional)..... 1,450.00

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

12030822904

4

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 OF

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

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

A. SHEILA & DANE BOYINGTON

Mailing Address

6403 SAIL PT. LANE

City

HIXSON

State

TN

Zip Code

37343

FEC ID number of contributing federal political committee.

C00519447

Name of Employer

self

Occupation

-

Receipt For:

Primary General Other (specify)

Election Cycle-to-Date

Date of Receipt

MM ' DD ' YYYY
02 ' 12 ' 2012

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. ALNAR DANANI

Mailing Address

3411 KINGS COVE LN.

City

CHATT.

State

TN

Zip Code

37416

FEC ID number of contributing federal political committee.

C00519447

Name of Employer

Occupation

Receipt For:

Primary General Other (specify)

Election Cycle-to-Date

Date of Receipt

MM ' DD ' YYYY
03 ' 20 ' 2012

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

C. DR. MANMohan BAdhwar

Mailing Address

15720 CUMBERLAND ST.

City

RIVER NEW

State

MI

Zip Code

48192

FEC ID number of contributing federal political committee.

C00519447

Name of Employer

self

Occupation

DOCTOR

Receipt For:

Primary General Other (specify)

Election Cycle-to-Date

Date of Receipt

MM ' DD ' YYYY
03 ' ' ' 2012

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

TOTAL

2,000.00

4,100.00

12030822905

**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	OF
	<input 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)
RON FAR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACCENT PRINTING INC

Mailing Address
CHATT. TN 37409

City
P.O. BOX 2318 State Zip Code

Purpose of Disbursement
SIGNS-YARD

Candidate Name
RON BHALLA Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: **TN** District: **03**

Date of Disbursement
03 01 2012

Amount of Each Disbursement this Period
5,726.35

B. Full Name (Last, First, Middle Initial)
CHATT. TIMES FREE PRESS

Mailing Address
400 E 11th ST

City
ADVERTISEMENT State Zip Code

Purpose of Disbursement
RON BHALLA

Candidate Name
RON BHALLA Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: **TN** District: **03**

Date of Disbursement
02 29 2012

Amount of Each Disbursement this Period
1,502.06

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

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

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

7,228.41

12030822906

**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	OF
	<input 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)
RON FAR CONGRESS

A.

Full Name (Last, First, Middle Initial) **STAPLES**

Date of Disbursement **02 03 2012**

Mailing Address **5450 HWY 153**

City **CHATT.** State **TN** Zip Code **37343**

Purpose of Disbursement **HAND OUTS, CARDS**

Candidate Name **RON BHALLA**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **TN** District: **03**

Amount of Each Disbursement this Period **756.64**

B.

Full Name (Last, First, Middle Initial) **STAPLES**

Date of Disbursement **12 29 2012**

Mailing Address **5450 HWY 153**

City **CHATT.** State **TN** Zip Code **37343**

Purpose of Disbursement **HAND OUTS, CARDS**

Candidate Name **RON BHALLA**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **TN** District: **03**

Amount of Each Disbursement this Period **703.00**

C.

Full Name (Last, First, Middle Initial) **STAPLES**

Date of Disbursement **03 13 2012**

Mailing Address **5450 HWY 153**

City **CHATT.** State **TN** Zip Code **37343**

Purpose of Disbursement **CARDS**

Candidate Name **RON BHALLA**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **TN** District: **03**

Amount of Each Disbursement this Period **574.85**

SUBTOTAL of Disbursements This Page (optional)..... **2084.49**

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

12030822907

**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 OF	
<input type="checkbox"/> 17	<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

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NAME OF COMMITTEE (In Full)
RAN FAR CONGRESS

Full Name (Last, First, Middle Initial) A. CHATT. TIMES FREE PRESS		Date of Disbursement 01 2012
Mailing Address 400 E. 11th ST		Amount of Each Disbursement this Period 791.00
City CHATT. TN	State Zip Code	
Purpose of Disbursement ADVERTISEMENT		Category/Type
Candidate Name RAN BHALLA		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) B. KEN ARR		Date of Disbursement FRAM JAN TO 03 31 2012
Mailing Address 4006 E. FREEDOM BR.		Amount of Each Disbursement this Period 1563.43
City OLTEWAH TN	State Zip Code	
Purpose of Disbursement FOOD - GAS - LODGING ETC.		Category/Type
Candidate Name CAMPAIGN HELP		
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. MISC EXP LESS THAN \$200		Date of Disbursement 03 31 2012
Mailing Address RECEIPTS FROM JAN-MAR 2012		Amount of Each Disbursement this Period 1747.16
City	State Zip Code	
Purpose of Disbursement		Category/Type
Candidate Name		
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).....	
TOTAL This Period (last page this line number only).....	

12030822908

**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	OF
	<input 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)
RAN FAR CONGRESS

A.

Full Name (Last, First, Middle Initial) **STAPLES**

Mailing Address **5450 HWY 153**

City **CHAFF** State **TX** Zip Code **37343**

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement **03 31 2012**

Amount of Each Disbursement this Period **780.51**

Category/Type

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

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

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

14145.00

1203082909

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)		Report Covering Period:				
		From:		To:		
		[] / [] / []		[] / [] / []		
Committee Name RAN FOR CONGRESS				(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						
B	Column Total Last Page Only.....					
	(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	N/A					
B	0	0	4189	0	10891	0
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A						
B	10891	0	0	15080	14145	0
	(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
A						
B						
	(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
A						
B			14145			
	(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			
A	/					
B						

12030822910

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)
6/13/12

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


PREPARER

6/18/12
DATE PREPARED

12030822911