

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

JACK UPPAL FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 1936

Check if different than previously reported. (ACC)

LINCOLN

CA

95648

2. **FEC IDENTIFICATION NUMBER** ▼

C C00506436

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

CA

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

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

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on 11 / 06 / 2012 in the State of CA

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

10 / 01 / 2012 through 10 / 17 / 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 KATHRYN UPPAL

Signature of Treasurer KATHRYN UPPAL

[Electronically Filed]

Date

10 / 28 / 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.

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
JACK UPPAL FOR CONGRESS

Report Covering the Period: From: / / To: / /

| | 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)).... | 6484.20 | 46115.32 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 6484.20 | 46115.32 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 8353.02 | 32466.16 |
| (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))..... | 8353.02 | 32466.16 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 16235.42 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 5000.00 | |

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)

Write or Type Committee Name

JACK UPPAL FOR CONGRESS

Report Covering the Period: From: / / To: / /

| 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)..... | 1581.20 | 12801.20 |
| (ii) Unitemized..... | 2893.00 | 25656.84 |
| (iii) TOTAL of contributions from individuals ▶ | 4474.20 | 38458.04 |
| (b) Political Party Committees..... | 2010.00 | 6260.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 0.00 | 1397.28 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 6484.20 | 46115.32 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 5000.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 5000.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 466.26 | 829.26 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 6950.46 | 51944.58 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 8353.02 | 32466.16 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN 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. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 3243.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 8353.02 | 35709.16 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 17637.98 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 6950.46 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 24588.44 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 8353.02 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 16235.42 |

**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 5 OF 15 |
| | <input checked="" 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)
JACK UPPAL FOR CONGRESS

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) WILLIAM BANDES | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 08 / 2012 | |
| Mailing Address 2300 TUSCANY ST | | Transaction ID : SA11AI.5253 | |
| City ROSEVILLE | State CA | Zip Code 95661 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 411.20 | |
| Name of Employer NONE | Occupation | | |
| Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 561.20 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) LOLA BLEVINS | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 | |
| Mailing Address 24401 SUTTER CREEK RD | | Transaction ID : SA11AI.4935 | |
| City VOLCANO | State CA | Zip Code 95681 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 | |
| Name of Employer STUDENT | Occupation | | |
| Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 345.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) WESLEY CLARK | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 05 / 2012 | |
| Mailing Address 1113 CORAL DRIVE | | Transaction ID : SA11AI.5270 | |
| City ROSEVILLE | State CA | Zip Code 95661 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 | |
| Name of Employer RETIRED | Occupation | | |
| Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 400.00 | | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 661.20 |
| TOTAL This Period (last page this line number only)..... | [] |

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

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NAME OF COMMITTEE (In Full)
JACK UPPAL FOR CONGRESS

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

Mailing Address **2104 BENTON LOOP**

City **ROSEVILLE** State **CA** Zip Code **95747**

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

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date **300.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 08 / 2012

Transaction ID : SA11AI.5247

Amount of Each Receipt this Period
20.00

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

Mailing Address **PO BOX 370**

City **MIDPINES** State **CA** Zip Code **95345**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 13 / 2012

Transaction ID : SA11AI.5356

Amount of Each Receipt this Period
250.00

AB

C. Full Name (Last, First, Middle Initial)
CAROLYN/ANTHONY FINK

Mailing Address **1404 SUSSEX CT**

City **ROSEVILLE** State **CA** Zip Code **95661**

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

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date **750.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 02 / 2012

Transaction ID : SA11AI.5237

Amount of Each Receipt this Period
300.00

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

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

570.00

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

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NAME OF COMMITTEE (In Full)
JACK UPPAL FOR CONGRESS

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

Mailing Address 6846 DOUBLE EAGLE RD

City MARIPOSA State CA Zip Code 95338

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 13 / 2012

Transaction ID : SA11AI.5358

Amount of Each Receipt this Period
250.00

AB

B. Full Name (Last, First, Middle Initial)
MARY E SPITZER

Mailing Address PO BOX 1001

City SAN ANDREAS State CA Zip Code 95249-1001

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

Name of Employer RETIRED Occupation TEACHER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 08 / 2012

Transaction ID : SA11AI.5301

Amount of Each Receipt this Period
100.00

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
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

350.00

1581.20

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

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NAME OF COMMITTEE (In Full)
JACK UPPAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AUBURN AREA DEMOCRATIC CLUB

Mailing Address PO BOX 6851
530-888-9013

City Auburn State CA Zip Code 95604-6851

FEC ID number of contributing federal political committee. **C** C00422022

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2012

Transaction ID : SA11B.5321

Amount of Each Receipt this Period
1200.00

B. Full Name (Last, First, Middle Initial)
FIVE CTIES DEMOCRATIC CLUB

Mailing Address 7510 RIDGEVIEW LN

City PENRYN State CA Zip Code 95663

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 02 / 2012

Transaction ID : SA11B.5323

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
TUOLUMNE COUNTY DEMOCRATIC CLUB

Mailing Address PO BOX 1211

City COLUMBIA State CA Zip Code 95310

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2012

Transaction ID : SA11B.5317

Amount of Each Receipt this Period
300.00

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

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

1800.00

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

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NAME OF COMMITTEE (In Full)
JACK UPPAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UNITED DEMOCRATS OF EL DORADO COUNTY

Mailing Address **PO BOX 762**
530-642-8775

City **DIAMOND SPRINGS** State **CA** Zip Code **95619**

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

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
_____ **460.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 01 / 2012

Transaction ID : SA11B.5322

Amount of Each Receipt this Period
 _____ **210.00**

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
 M M / D D / Y Y Y Y

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
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

_____ **210.00**

_____ **2100.00**

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

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NAME OF COMMITTEE (In Full)
JACK UPPAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BEST BUY #00001297

Mailing Address

City State Zip Code
ROSEVILLE CA

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
304.57

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2012

Transaction ID : SA15.5388

Amount of Each Receipt this Period
304.57
RETURNED PRINTER REFUND

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
M M / D D / Y Y Y Y Y Y

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
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

304.57

304.57

**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 11 OF 15 | | | |
| | <input checked="" 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)
JACK UPPAL FOR CONGRESS

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. ACT BLUE | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012 |
| Mailing Address 14 ARROW ST SUITE 11 617-517-7600 | | Amount of Each Disbursement this Period 106.91 Transaction ID : SB17.5428 |
| City CAMBRIDGE State MA Zip Code 02138 | Purpose of Disbursement PROCESSING FEE 001 Category/Type | |
| Candidate Name JACK UPPAL FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: CA District: 04 | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. ALLEN BRAUER | | Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012 |
| Mailing Address 100 GONCE WAY 916 203 4197 | | Amount of Each Disbursement this Period 851.02 Transaction ID : SB17.5402 |
| City FOLSUM State CA Zip Code | Purpose of Disbursement SOCIAL MEDIA 001 Category/Type | |
| Candidate Name JACK UPPAL FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: CA District: 04 | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. BEST BUY #00001297 | | Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012 |
| Mailing Address | | Amount of Each Disbursement this Period 304.57 Transaction ID : SB17.5385 |
| City ROSEVILLE State CA Zip Code | Purpose of Disbursement PRINTER 001 Category/Type | |
| Candidate Name JACK UPPAL FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: CA District: 04 | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1262.50 |
| TOTAL This Period (last page this line number only)..... | |

**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 12 OF 15 | |
| | <input checked="" 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)
JACK UPPAL FOR CONGRESS

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. GOLD COUNTRY MEDIA | | Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012 |
| Mailing Address 1030 HIGH ST | | Amount of Each Disbursement this Period 822.40 Transaction ID : SB17.5395 |
| City AUBURN State CA Zip Code 95604 | Purpose of Disbursement Candidate Name JACK UPPAL FOR CONGRESS Category/Type 004 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04 | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. INFORMATION IN THE PUBLIC INTEREST | | Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012 |
| Mailing Address | | Amount of Each Disbursement this Period 2800.00 Transaction ID : SB17.5398 |
| City State Zip Code | Purpose of Disbursement TV ADS COMCAST Candidate Name JACK UPPAL FOR CONGRESS Category/Type 004 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04 | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. KELLY 47 | | Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012 |
| Mailing Address 1009 ENTERPRISE WAY SUITE 1 916 780-0622 | | Amount of Each Disbursement this Period 150.39 Transaction ID : SB17.5384 |
| City ROSEVILLE State CA Zip Code | Purpose of Disbursement PAPER Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3772.79 |
| TOTAL This Period (last page this line number only)..... | |

**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 13 OF 15 | | | |
| | <input checked="" 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)
JACK UPPAL FOR CONGRESS

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. KELLY 47 | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012 |
| Mailing Address 1009 ENTERPRISE WAY SUITE 1 916 780-0622 | | Amount of Each Disbursement this Period 982.10 Transaction ID : SB17.5392 |
| City ROSEVILLE State CA Zip Code | Purpose of Disbursement PAPER Category/Type | |
| Candidate Name JACK UPPAL FOR CONGRESS | | Amount of Each Disbursement this Period 274.76 Transaction ID : SB17.5382 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04 | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. MOTHER LODE PRINTING | | Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012 |
| Mailing Address 10 FRENCH BAR RD 209 223-2240 | | Amount of Each Disbursement this Period 679.33 Transaction ID : SB17.5397 |
| City JACKSON State CA Zip Code 95642 | Purpose of Disbursement POSTAGE Category/Type 001 | |
| Candidate Name JACK UPPAL FOR CONGRESS | | Amount of Each Disbursement this Period 274.76 Transaction ID : SB17.5382 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04 | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. USPS | | Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012 |
| Mailing Address LINCOLN POST OFFICE | | Amount of Each Disbursement this Period 982.10 Transaction ID : SB17.5397 |
| City LINCOLN State CA Zip Code 95648 | Purpose of Disbursement POSTAGE Category/Type 001 | |
| Candidate Name JACK UPPAL FOR CONGRESS | | Amount of Each Disbursement this Period 274.76 Transaction ID : SB17.5382 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04 | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 982.10 |
| TOTAL This Period (last page this line number only)..... | |

**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 14 OF 15 | | | |
| | <input checked="" 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)
JACK UPPAL FOR CONGRESS

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. USPS | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012 |
| Mailing Address LINCOLN POST OFFICE | | Amount of Each Disbursement this Period 503.88 Transaction ID : SB17.5400 |
| City LINCOLN | State CA | |
| Zip Code 95648 | Purpose of Disbursement POSTAGE | Category/ Type 003 |
| Candidate Name JACK UPPAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: CA District: 04 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. VIKING PRINTING | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012 |
| Mailing Address 1125 11th ST 916-447-6100 | | Amount of Each Disbursement this Period 350.19 Transaction ID : SB17.5394 |
| City SACRAMENTO | State CA | |
| Zip Code 95814 | Purpose of Disbursement | Category/ Type 003 |
| Candidate Name JACK UPPAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: CA District: 04 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. VIKING PRINTING | | Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012 |
| Mailing Address 1125 11th ST 916-447-6100 | | Amount of Each Disbursement this Period 1481.56 Transaction ID : SB17.5401 |
| City SACRAMENTO | State CA | |
| Zip Code 95814 | Purpose of Disbursement PRINTING | Category/ Type 003 |
| Candidate Name JACK UPPAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: CA District: 04 | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2335.63 |
| TOTAL This Period (last page this line number only)..... | 8353.02 |

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **JACK UPPAL FOR CONGRESS** Transaction ID : **SC/10.4126**

LOAN SOURCE Full Name (Last, First, Middle Initial) **JACK UPPAL FOR CONGRESS** *[PERSONAL FUNDS]* Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 PO BOX 1936

City State ZIP Code
 LINCOLN CA 95648

| | | |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan 5000.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 5000.00 |
|------------------------------------|------------------------------------|--|

TERMS

| | | | |
|---------------------------------------|---------------------------------|--------------------------|---|
| Date Incurred M 03 / D 19 / Y 2012 | Date Due M M / D D / Y Y Y Y | Interest Rate % (apr) | Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------------------------------|---------------------------------|--------------------------|---|

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

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|--|---------|
| SUBTOTALS This Period This Page (optional)..... | 5000.00 |
| TOTALS This Period (last page in this line only)..... | 5000.00 |

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