



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Steve Adams 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))....	13075.00	101744.99
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	13075.00	100744.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	19288.62	68111.73
(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)).....	19288.62	68111.73
8. Cash on Hand at Close of Reporting Period (from Line 27).....	31891.63	
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).....	30775.33	

**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

**Steve Adams for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10620.00	0.00
(ii) Unitemized.....	455.00	0.00
(iii) TOTAL of contributions from individuals ▶	11075.00	92244.99
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	9500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	13075.00	101744.99
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	22.77	183.37
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	13097.77	101928.36

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	19288.62	68111.73
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	1000.00
(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	1000.00
21. OTHER DISBURSEMENTS .....	425.00	925.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	19713.62	70036.73

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	38507.48
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13097.77
25. SUBTOTAL (add Line 23 and Line 24).....	51605.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	19713.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	31891.63

**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 22
	<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)  
**Steve Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ed Adkison**

Mailing Address 2216 Monroe

City Riverside State CA Zip Code 92504

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

Name of Employer Adkan Engineers Occupation Land Surveyor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 06 / 2014**

**Transaction ID : 11AI-1390**

Amount of Each Receipt this Period  
**110.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ed Adkison**

Mailing Address 2216 Monroe

City Riverside State CA Zip Code 92504

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

Name of Employer Adkan Engineers Occupation Land Surveyor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 17 / 2014**

**Transaction ID : 11AI-1395**

Amount of Each Receipt this Period  
**110.00**

**C.** Full Name (Last, First, Middle Initial)  
**William Alden**

Mailing Address 3129 Cajalco Rd

City Perris State CA Zip Code 92570

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

Name of Employer Alden Limousine Service Occupation business owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : 11AI-1414**

Amount of Each Receipt this Period  
**2600.00**

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

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

**2820.00**

**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 6 OF 22
	<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)  
**Steve Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Alden**

Mailing Address 3129 Cajalco Rd

City Perris State CA Zip Code 92570

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

Name of Employer Alden Limousine Service Occupation business owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : 11AI-1415**

Amount of Each Receipt this Period  
**400.00**

**B.** Full Name (Last, First, Middle Initial)  
**John Burnard**

Mailing Address 6251 Alhambra Ave

City Riverside State CA Zip Code 92505

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

Name of Employer Compass Pest Management Occupation Exterminator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : 11AI-1409**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Visanu Chawla**

Mailing Address 22909 Lazy Trail Rd

City Diamond Bar State CA Zip Code 91765

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

Name of Employer Royal Interpack Group Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 11 / 2014**

**Transaction ID : 11AI-1402**

Amount of Each Receipt this Period  
**2000.00**

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

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

**2900.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 22  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Steve Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**R. B Clymer**

Mailing Address 32402 Corte Las Cruces

City State Zip Code  
Temecula CA 92592

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

Name of Employer Occupation  
The Bodyshop Collision Repair Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 21 2014

**Transaction ID : 11AI-1405**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert J Dole**

Mailing Address 700 New Hampshire Ave NW

City State Zip Code  
Washington DC 20037

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

Name of Employer Occupation  
U.S. Senate Senator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 19 2014

**Transaction ID : 11AI-1412**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Donald P Feeley**

Mailing Address 2910 14th St

City State Zip Code  
Riverside CA 92507

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

Name of Employer Occupation  
City Body & Frame President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 19 2014

**Transaction ID : 11AI-1411**

Amount of Each Receipt this Period  
1000.00

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

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

1600.00

**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 8 OF 22
	<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)  
**Steve Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rick Hartsock**

Mailing Address 1055 E 3rd St

City State Zip Code  
Corona CA 92879

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

Name of Employer Occupation  
Mission Ambulance Chief Operating Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 09 / 2014**

**Transaction ID : 11AI-1392**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Brian Jaramillo**

Mailing Address 687 Firwood Ct

City State Zip Code  
Riverside CA 92506

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

Name of Employer Occupation  
Tilden-Coil Constructors President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 28 / 2014**

**Transaction ID : 11AI-1397**

Amount of Each Receipt this Period  
**2000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Gary D Roberts**

Mailing Address 6206 Appian Way

City State Zip Code  
Riverside CA 92506

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

Name of Employer Occupation  
N/A retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 12 / 2014**

**Transaction ID : 11AI-1408**

Amount of Each Receipt this Period  
**50.00**

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

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

**3050.00**

**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 22
	<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)  
**Steve Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ara Wansikehian**

Mailing Address 9812 Sunderland St

City Santa Ana State CA Zip Code 92705

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

Name of Employer AW Convenience Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : 11AI-1410**

Amount of Each Receipt this Period  
 250.00

**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 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).....

250.00

10620.00

**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 22
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Steve Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ken Calvert for Congress**

Mailing Address PO Box 78376

City Corona State CA Zip Code 92877

FEC ID number of contributing federal political committee. **C** C00257337

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : 11C-1416**

Amount of Each Receipt this Period  
2000.00

**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 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).....

2000.00

2000.00

**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 11 OF 22
	<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)  
**Steve Adams for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PROVIDENT BANK**

Mailing Address 3756 CENTRAL AVE.

City RIVERSIDE State CA Zip Code 92506

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **183.37**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : 15-1489-O**

Amount of Each Receipt this Period  
**7.68**  
 interest

**B.** Full Name (Last, First, Middle Initial)  
**PROVIDENT BANK**

Mailing Address 3756 CENTRAL AVE.

City RIVERSIDE State CA Zip Code 92506

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **183.37**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 28 / 2014**

**Transaction ID : 15-1477-O**

Amount of Each Receipt this Period  
**7.04**  
 interest

**C.** Full Name (Last, First, Middle Initial)  
**PROVIDENT BANK**

Mailing Address 3756 CENTRAL AVE.

City RIVERSIDE State CA Zip Code 92506

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **183.37**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : 15-1471-O**

Amount of Each Receipt this Period  
**8.05**  
 interest

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

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

**22.77**

**22.77**

**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 22	
	<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)  
**Steve Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. STEVE ADAMS</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : 17-890</b>
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-Hampton Inn-refreshments for volunteers	Category/ Type 001
Candidate Name <b>STEVE ADAMS</b>	Office Sought: <input checked="" 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: CA District: 41	

Full Name (Last, First, Middle Initial) <b>B. STEVE ADAMS</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 457.05 <b>Transaction ID : 17-896</b>
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-PIP-vinyl banner	Category/ Type 006
Candidate Name <b>STEVE ADAMS</b>	Office Sought: <input checked="" 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: CA District: 41	

Full Name (Last, First, Middle Initial) <b>C. STEVE ADAMS</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 348.50 <b>Transaction ID : 17-897</b>
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-SouthwestAirlines-Washington DC	Category/ Type 002
Candidate Name <b>STEVE ADAMS</b>	Office Sought: <input checked="" 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: CA District: 41	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	855.55
<b>TOTAL</b> 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 22			
	<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)  
**Steve Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. PIP</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 4093 Market St.		Amount of Each Disbursement this Period 457.05
City Riverside	State CA	
Zip Code 92501	Purpose of Disbursement vinyl banner	Transaction ID : 17-900-S
Candidate Name	006 Category/ Type	
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)	[MEMO ITEM] SUBVENDOR to STEVE ADAMS
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 2702 Love Field Dr.		Amount of Each Disbursement this Period 348.50
City Dallas	State TX	
Zip Code 75235	Purpose of Disbursement Washington DC	Transaction ID : 17-901-S
Candidate Name	002 Category/ Type	
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)	[MEMO ITEM] SUBVENDOR to STEVE ADAMS
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STEVE ADAMS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 308.72
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-jetBlue-air fare to San Francisco 3/15	Transaction ID : 17-912
Candidate Name <b>STEVE ADAMS</b>	002 Category/ Type	
Office Sought: <input checked="" 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: CA District: 41		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	308.72
<b>TOTAL</b> 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 22			
	<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)  
**Steve Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. MaryAnn Adams</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 5354 College Ave.		Amount of Each Disbursement this Period 3,000.00 186.29
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-Saples-printer ink & paper	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) <b>B. MaryAnn Adams</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 5354 College Ave.		Amount of Each Disbursement this Period 3,000.00 61.74
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse - ad	Category/ Type 004
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:	

Full Name (Last, First, Middle Initial) <b>c. MaryAnn Adams</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 5354 College Ave.		Amount of Each Disbursement this Period 3,000.00 60.87
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse - Staples - file folders & labels	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	308.90
<b>TOTAL</b> 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 15 OF 22			
	<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)  
**Steve Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. MaryAnn Adams</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014	
Mailing Address 5354 College Ave.			Amount of Each Disbursement this Period 27.29	
City Riverside	State CA	Zip Code 92505	Transaction ID : 17-883	
Purpose of Disbursement reimburse - Staples - glue, pens, labels		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) <b>B. MaryAnn Adams</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014	
Mailing Address 5354 College Ave.			Amount of Each Disbursement this Period 14.35	
City Riverside	State CA	Zip Code 92505	Transaction ID : 17-884	
Purpose of Disbursement reimburse - Staples - legal folders		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) <b>c. MaryAnn Adams</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014	
Mailing Address 5354 College Ave.			Amount of Each Disbursement this Period 216.00	
City Riverside	State CA	Zip Code 92505	Transaction ID : 17-885	
Purpose of Disbursement reimburse - Staples - color copies		Category/ Type 001		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	257.64
<b>TOTAL</b> 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 16 OF 22			
	<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)  
**Steve Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. North Star Campaign Systems Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 11421 Dabenport St.		Amount of Each Disbursement this Period 2470.03 <b>Transaction ID : 17-889</b>
City Omaha State NE Zip Code 68154	Purpose of Disbursement predictive capable VoIP phone system Candidate Name Category/Type 007	
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) <b>B. North Star Campaign Systems Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 11421 Dabenport St.		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : 17-910</b>
City Omaha State NE Zip Code 68154	Purpose of Disbursement data processing Candidate Name Category/Type 001	
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) <b>C. Pacific Political Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 1800 Thibodo Road		Amount of Each Disbursement this Period 1006.00 <b>Transaction ID : 17-886</b>
City Vista State CA Zip Code 92081	Purpose of Disbursement commission for fundraising Candidate Name Category/Type 003	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3776.03
<b>TOTAL</b> 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 17 OF 22			
	<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)  
**Steve Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 115.00		
City San Francisco	State CA	Zip Code 94105	Transaction ID : 17-895		
Purpose of Disbursement fees & charges		003 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:					

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 115.00		
City San Francisco	State CA	Zip Code 94105	Transaction ID : 17-894		
Purpose of Disbursement fees & charges		003 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:					

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 11.50		
City San Francisco	State CA	Zip Code 94105	Transaction ID : 17-903		
Purpose of Disbursement fees & charges		003 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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	241.50
<b>TOTAL</b> 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 18 OF 22			
	<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)  
**Steve Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 2.88		
City San Francisco	State CA	Zip Code 94105	Transaction ID : 17-908		
Purpose of Disbursement fees & charges		003 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:					

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 28.75		
City San Francisco	State CA	Zip Code 94105	Transaction ID : 17-909		
Purpose of Disbursement fees & charges		003 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:					

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 172.50		
City San Francisco	State CA	Zip Code 94105	Transaction ID : 17-916		
Purpose of Disbursement fees & charges		003 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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	204.13
<b>TOTAL</b> 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 19 OF 22			
	<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)  
**Steve Adams for Congress**

**A. Registrar of Voters**

Full Name (Last, First, Middle Initial)  
Mailing Address 2724 Gateway Dr.

City Riverside State CA Zip Code 92507

Purpose of Disbursement candidate ballot statement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 4800.00

Transaction ID : 17-904

Category/Type: 001

**B. Teaman, Ramirez & Smith Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address 4201 Brockton Ave. Ste. 100

City Riverside State CA Zip Code 92501

Purpose of Disbursement December campaign reporting services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 08 / 2014

Amount of Each Disbursement this Period: 433.50

Transaction ID : 17-880

Category/Type: 001

**C. Teaman, Ramirez & Smith Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address 4201 Brockton Ave. Ste. 100

City Riverside State CA Zip Code 92501

Purpose of Disbursement January campaign reporting services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 07 / 2014

Amount of Each Disbursement this Period: 785.12

Transaction ID : 17-892

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 6018.62

**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 20 OF 22			
	<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)  
**Steve Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. Teaman, Ramirez &amp; Smith Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y <b>03 / 07 / 2014</b>		
Mailing Address 4201 Brockton Ave. Ste. 100			Amount of Each Disbursement this Period <b>317.53</b>		
City Riverside	State CA	Zip Code 92501	Transaction ID : 17-905		
Purpose of Disbursement February campaign reporting services		Category/ Type <b>001</b>			
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:					

Full Name (Last, First, Middle Initial) <b>B. Voter Link</b>			Date of Disbursement M M / D D / Y Y Y Y <b>03 / 18 / 2014</b>		
Mailing Address 13348 Alpine Cove Dr.			Amount of Each Disbursement this Period <b>3000.00</b>		
City Alpine	State UT	Zip Code 84004	Transaction ID : 17-911		
Purpose of Disbursement voter list file license		Category/ Type <b>001</b>			
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:					

Full Name (Last, First, Middle Initial) <b>c. Wenzel Strategies LLC</b>			Date of Disbursement M M / D D / Y Y Y Y <b>03 / 10 / 2014</b>		
Mailing Address 4223 Elmway Dr.			Amount of Each Disbursement this Period <b>4000.00</b>		
City Toledo	State OH	Zip Code 43614	Transaction ID : 17-907		
Purpose of Disbursement telephone polling expense		Category/ Type <b>005</b>			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>7317.53</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>19288.62</b>

**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 21 OF 22	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Steve Adams for Congress**

Full Name (Last, First, Middle Initial) <b>A. STEVE ADAMS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : 21-891</b>
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-Asian Pacific Cultural Association-Lunar Festival	Category/ Type 012
Candidate Name <b>STEVE ADAMS</b>	Office Sought: <input checked="" 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: CA District: 41	

Full Name (Last, First, Middle Initial) <b>B. STEVE ADAMS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : 21-898</b>
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-RPOA-donation	Category/ Type 012
Candidate Name <b>STEVE ADAMS</b>	Office Sought: <input checked="" 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: CA District: 41	

Full Name (Last, First, Middle Initial) <b>c. Latino Network</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address P. O. Box 20615		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : 21-906</b>
City Riverside	State CA	
Zip Code 92516	Purpose of Disbursement 2 program ads	Category/ Type 012
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	425.00
<b>TOTAL</b> This Period (last page this line number only).....	425.00

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Steve Adams for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RedRock Strategies, Inc.</b>		Nature of Debt (Purpose): general campaign consultant
Mailing Address 9500 W. Flamingo Rd. #203		
City State Zip Code Las Vegas NV 89147		

Outstanding Balance Beginning This Period <input type="text" value="16219.66"/>	<b>Transaction ID : D10-650-V</b>	
Amount Incurred This Period <input type="text" value="14555.67"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="30775.33"/>

B. 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 <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

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 <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="30775.33"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="30775.33"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="30775.33"/>