

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

KLAUDER4CONGRESS

ADDRESS (number and street)

811 Parkview Pl. W.

Check if different than previously reported. (ACC)

Fernandina Beach

FL

32034

2. FEC IDENTIFICATION NUMBER ▼

C C00502484

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

FL

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 James Klauder

Signature of Treasurer James Klauder

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
KLAUDER4CONGRESS

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))....	12875.00	30804.00
(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)).....	12875.00	30804.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	22892.85	40860.90
(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)).....	22892.85	40860.90
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5228.92	
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).....	12035.82	

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

KLAUDER4CONGRESS

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).....	12450.00	29061.00
(ii) Unitemized.....	425.00	1725.00
(iii) TOTAL of contributions from individuals ▶	12875.00	30786.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	18.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	12875.00	30804.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	5151.06	12035.82
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	5151.06	12035.82
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	18026.06	42839.82

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	22892.85	40860.90
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	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	22892.85	40860.90

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	10095.71
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18026.06
25. SUBTOTAL (add Line 23 and Line 24).....	28121.77
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	22892.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5228.92

**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 21
	<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)
KLAUDER4CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Barry L. Booth

Mailing Address P.O. Box 7406

City Spanish Fort State AL Zip Code 36577-7406

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

Name of Employer self Occupation dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2012

Transaction ID : SA11AI.4391

Amount of Each Receipt this Period
 1000.00
 contribution

B. Full Name (Last, First, Middle Initial)
Nancy Cline

Mailing Address 24737 Arnold Drive

City Sonoma State CA Zip Code 95476

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

Name of Employer Cline Winery Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.4384

Amount of Each Receipt this Period
 1000.00
 contribution

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

Mailing Address 2 Commonwealth Ave.

City Boston State MA Zip Code 02116

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

Name of Employer Berkshire Partners Occupation investment banker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2012

Transaction ID : SA11AI.4386

Amount of Each Receipt this Period
 2500.00
 contribution

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

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

4500.00

**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 21
	<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)
KLAUDER4CONGRESS

A. Full Name (Last, First, Middle Initial)
Judy Ferenbach

Mailing Address 2 Commonwealth Ave.

City Boston State MA Zip Code 02116

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

Name of Employer self Occupation homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2012

Transaction ID : SA11AI.4387

Amount of Each Receipt this Period
 2500.00
 contribution

B. Full Name (Last, First, Middle Initial)
Jon Finstuen

Mailing Address 200 Chapel Creek, #224, Mandeville

City Mandeville State LA Zip Code 70471

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

Name of Employer Shell Oil Occupation Executive

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
 09 / 05 / 2012

Transaction ID : SA11AI.4378

Amount of Each Receipt this Period
 250.00
 contribution

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

Mailing Address 2061 Oak Marsh Rd.

City Fernandina Beach State FL Zip Code 32034

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

Name of Employer self Occupation real estate

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2012

Transaction ID : SA11AI.4377

Amount of Each Receipt this Period
 200.00
 contribution

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

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

2950.00

**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 21
	<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)
KLAUDER4CONGRESS

A. Full Name (Last, First, Middle Initial)
Louis Klauder

Mailing Address 527 Park Ave, Quarryville, PA 17566

City: Quarryville State: PA Zip Code: 17566

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

Name of Employer: NA Occupation: retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 09 / 05 / 2012

Transaction ID : SA11AI.4380

Amount of Each Receipt this Period: 250.00 contribution

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

Mailing Address 7740 Point Meadows Drive Suite 3B

City: Jacksonville State: FL Zip Code: 32256

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

Name of Employer: self Occupation: endodontist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 24 / 2012

Transaction ID : SA11AI.4349

Amount of Each Receipt this Period: 250.00 contribution

C. Full Name (Last, First, Middle Initial)
David M. Underwood

Mailing Address 909 Fannin Suite 1640

City: Houston State: TX Zip Code: 77010

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

Name of Employer: NA Occupation: investments

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 07 / 02 / 2012

Transaction ID : SA11AI.4341

Amount of Each Receipt this Period: 2000.00 contribution

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

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

2500.00

**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 21
	<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)
KLAUDER4CONGRESS

A. Full Name (Last, First, Middle Initial)
Doug Wheeler

Mailing Address 65 West 13th Street, 5F

City State Zip Code
New York NY 10011

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

Name of Employer self Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2012

Transaction ID : SA11Al.4376

Amount of Each Receipt this Period
 2500.00
 contribution

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 M / D 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 M / D 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).....

2500.00

12450.00

**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 21
	<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)
KLAUDER4CONGRESS

A. Full Name (Last, First, Middle Initial)
James Klauder

Mailing Address 811 Parkview Pl. W.

City: Fernandina Beach State: FL Zip Code: 32034

FEC ID number of contributing federal political committee: **C H2FL04112**

Name of Employer: Foundation for Teaching Econom Occupation: Vice President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **7056.31**

Date of Receipt: **09 / 18 / 2012**

Transaction ID : SA13A.4403

Amount of Each Receipt this Period: **2900.00**

loan from candidate

B. Full Name (Last, First, Middle Initial)
James Klauder

Mailing Address 811 Parkview Pl. W.

City: Fernandina Beach State: FL Zip Code: 32034

FEC ID number of contributing federal political committee: **C H2FL04112**

Name of Employer: Foundation for Teaching Econom Occupation: Vice President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **9307.37**

Date of Receipt: **09 / 28 / 2012**

Transaction ID : SA13A.4412

Amount of Each Receipt this Period: **2251.06**

JK loan to campaign

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

Amount of Each Receipt this Period

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

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

5151.06

5151.06

**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 10 OF 21			
	<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)
KLAUDER4CONGRESS

Full Name (Last, First, Middle Initial) A. CBS Outdoor		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2012
Mailing Address 6821 Southpoint Dr. N s-209		Amount of Each Disbursement this Period 2428.00
City Jacksonville	State FL Zip Code 32216	
Purpose of Disbursement Billboard Ad	Category/Type 004	Transaction ID : SB17.4398
Candidate Name KLAUDER4CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL 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. Clear Channel Outdoor		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 11700 Central Parkway, Suite 100		Amount of Each Disbursement this Period 15000.00
City Jacksonville	State FL Zip Code 32224	
Purpose of Disbursement 5 outdoor billboards	Category/Type 004	Transaction ID : SB17.4394
Candidate Name KLAUDER4CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL 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. Flash Foods		Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period 31.99
City Fernandina Beach	State FL Zip Code 32034	
Purpose of Disbursement gas to drive to fireworks event	Category/Type 002	Transaction ID : SB17.4345
Candidate Name KLAUDER4CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL 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).....	17459.99
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 11 OF 21			
	<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)
KLAUDER4CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Flash Foods		M M / D D / Y Y Y Y 08 / 16 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		48.67
Purpose of Disbursement gas to go to political meeting		Transaction ID : SB17.4359
Candidate Name KLAUDER4CONGRESS		Category/ Type 001
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: FL District: 04		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Flash Foods		M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		26.89
Purpose of Disbursement gas to political event		Transaction ID : SB17.4365
Candidate Name KLAUDER4CONGRESS		Category/ Type 001
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: FL District: 04		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Flash Foods		M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		36.56
Purpose of Disbursement gas to political event		Transaction ID : SB17.4366
Candidate Name KLAUDER4CONGRESS		Category/ Type 001
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: FL District: 04		

SUBTOTAL of Disbursements This Page (optional).....	112.12
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 21			
	<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)
KLAUDER4CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Flash Foods		M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		_____ 44.70
Purpose of Disbursement gas to attend political event		Transaction ID : SB17.4375
Candidate Name KLAUDER4CONGRESS		
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: FL District: 04	Category/Type: 001	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Flash Foods		M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		_____ 49.91
Purpose of Disbursement gas to political event		Transaction ID : SB17.4407
Candidate Name KLAUDER4CONGRESS		
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: FL District: 04	Category/Type: 002	

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Flash Foods		M M / D D / Y Y Y Y 09 / 29 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		_____ 41.66
Purpose of Disbursement gas to political event		Transaction ID : SB17.4413
Candidate Name KLAUDER4CONGRESS		
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: FL District: 04	Category/Type: 002	

SUBTOTAL of Disbursements This Page (optional).....	_____ 136.27
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 21			
	<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)
KLAUDER4CONGRESS

Full Name (Last, First, Middle Initial) A. Go Daddy		Date of Disbursement MM / DD / YYYY 08 / 17 / 2012
Mailing Address 14455 N. Hayden Rd., Ste. 226		Amount of Each Disbursement this Period 38.16 Transaction ID : SB17.4358
City Scottsdale	State AZ	
Zip Code 85260	Purpose of Disbursement purchase domain name	Category/ Type 001
Candidate Name KLAUDER4CONGRESS	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: FL District: 04	

Full Name (Last, First, Middle Initial) B. Hartely Press, Inc		Date of Disbursement MM / DD / YYYY 08 / 23 / 2012
Mailing Address 4250 St. Augustine Rd		Amount of Each Disbursement this Period 1335.36 Transaction ID : SB17.4369
City Jacksonville	State FL	
Zip Code 32207	Purpose of Disbursement brochure printing	Category/ Type 004
Candidate Name KLAUDER4CONGRESS	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: FL District: 04	

Full Name (Last, First, Middle Initial) c. Proforma		Date of Disbursement MM / DD / YYYY 08 / 27 / 2012
Mailing Address 2050 Art Museum Dr.		Amount of Each Disbursement this Period 80.25 Transaction ID : SB17.4373
City Jacksonville	State FL	
Zip Code 32207-2579	Purpose of Disbursement artwork for brochure	Category/ Type 003
Candidate Name KLAUDER4CONGRESS	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: FL District: 04	

SUBTOTAL of Disbursements This Page (optional).....	1453.77
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 21			
	<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)
KLAUDER4CONGRESS

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement MM / DD / YYYY 08 / 09 / 2012
Mailing Address 1830 S. 8th St.		Amount of Each Disbursement this Period 69.35 Transaction ID : SB17.4353
City Fernandina Beach	State FL	
Zip Code 32034	Purpose of Disbursement paper and office supplies	Category/ Type 001
Candidate Name KLAUDER4CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 04	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement MM / DD / YYYY 08 / 19 / 2012
Mailing Address 1830 S. 8th St.		Amount of Each Disbursement this Period 41.67 Transaction ID : SB17.4361
City Fernandina Beach	State FL	
Zip Code 32034	Purpose of Disbursement graphic art supplies	Category/ Type 001
Candidate Name KLAUDER4CONGRESS	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: FL	District: 04	

Full Name (Last, First, Middle Initial) c. Vista Outdoor Advertising		Date of Disbursement MM / DD / YYYY 09 / 13 / 2012
Mailing Address 117 Osborne St.		Amount of Each Disbursement this Period 1550.00 Transaction ID : SB17.4388
City St. Marys	State GA	
Zip Code 31558	Purpose of Disbursement billboard	Category/ Type 004
Candidate Name KLAUDER4CONGRESS	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: FL	District: 04	

SUBTOTAL of Disbursements This Page (optional).....	1661.02
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 15 OF 21	
	<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)
KLAUDER4CONGRESS

Full Name (Last, First, Middle Initial) A. Vista Outdoor Advertising		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 117 Osborne St.		Amount of Each Disbursement this Period 1540.00
City St. Marys	State GA	
Zip Code 31558		
Purpose of Disbursement billboards		Category/ Type 004
Candidate Name KLAUDER4CONGRESS		
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: FL	District: 04	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
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:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
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).....	1540.00
TOTAL This Period (last page this line number only).....	22363.17

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4218**

LOAN SOURCE Full Name (Last, First, Middle Initial)
James Klauer

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
811 Parkview Pl. W.

City State ZIP Code
 Fernandina Beach FL 32034

Original Amount of Loan 1174.78	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1174.78
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TERMS

Date Incurred: M 03 / D 31 / Y 2012
 Date Due: M / D / Y 08/2012
 Interest Rate: 0.00 % (apr)
 Secured: Yes 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)..... ▶ 1174.78

TOTALS This Period (last page in this line only)..... ▶ []

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4339**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
James Klauer Primary
 Mailing Address 811 Parkview Pl. W. General
 Other (specify) ▼

City State ZIP Code
 Fernandina Beach FL 32034

Original Amount of Loan 2952.53	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2952.53
------------------------------------	------------------------------------	--

TERMS Date Incurred Date Due Interest Rate Secured:
 M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No
 06 / 29 / 2012

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)..... ▶ 2952.53
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
KLAUDER4CONGRESS

Transaction ID : **SC/10.4403**

LOAN SOURCE Full Name (Last, First, Middle Initial)
James Klauer

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
811 Parkview Pl. W.

City State ZIP Code
Fernandina Beach FL 32034

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
2900.00 0.00 2900.00

TERMS Date Incurred Date Due Interest Rate Secured:
09 / 18 / 2012 M M / D D / 11/6/2012 0.00 % (apr) Yes 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)..... ▶ 2900.00

TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4412**

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

Mailing Address
811 Parkview Pl. W.
 City State ZIP Code
 Fernandina Beach FL 32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2251.06	0.00	2251.06

TERMS
 Date Incurred: M 09 / D 28 / Y 2012
 Date Due: M M / D D / Y 11/06/2012
 Interest Rate: 0.00 % (apr)
 Secured: Yes 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)..... ▶ 2251.06
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
KLAUDER4CONGRESS

Transaction ID : **SC/10.4136**

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Klauder R. Klauder

Primary
 General
 Other (specify) ▼

Mailing Address
811 Parkview Pl. W.

City State ZIP Code
Fernandina Beach FL 32034

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
2089.19 0.00 2089.19

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 31 / Y 2011 M M / D D / Y 11/10/2012 0.00 % (apr) Yes 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)..... 2089.19

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4226**

LOAN SOURCE Full Name (Last, First, Middle Initial) Klauder R. Klauder	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 811 Parkview Pl. W.	

City	State	ZIP Code
Fernandina Beach	FL	32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
668.26	0.00	668.26

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 30 / Y 2012	M M / D D / Y 08/07/2012	0.00 % (apr)	<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).....	668.26
TOTALS This Period (last page in this line only).....	12035.82

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