

**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

ANNETTE TEIJEIRO FOR CONGRESS

ADDRESS (number and street)

1916 HOUSTON DRIVE

Check if different
than previously
reported. (ACC)

LAS VEGAS

NV

89104

2. FEC IDENTIFICATION NUMBER ▼

C

C00559492

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NV

01

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
05 / 22 / 2014

through

M M / D D / Y Y Y Y
06 / 30 / 2014

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 ANNETTE TEIJEIRO

Signature of Treasurer

ANNETTE TEIJEIRO

[Electronically Filed]

Date

M M / D D / Y Y Y Y
08 / 13 / 2014

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

FEC Form 3 (Revised 02/2003)

PAGE 2 / 17

Write or Type Committee Name

ANNETTE TEIJEIRO FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

	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))....	3087.00	37066.78
(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))	3087.00	37066.78
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	17127.11	36430.29
(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))	17127.11	36430.29
8. Cash on Hand at Close of Reporting Period (from Line 27).....	103660.64	
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)	103024.15	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 17

Write or Type Committee Name

ANNETTE TEIJEIRO FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
05 / 22 / 2014

To:

M M / D D / Y Y Y Y
06 / 30 / 2014

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).....**

2120.00

31076.00

(ii) Unitemized.....

967.00

5990.78

(iii) TOTAL of contributions from individuals ▶

3087.00

37066.78

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

3087.00

37066.78

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

32.26

103024.15

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

32.26

103024.15

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)..... ▶

3119.26

140090.93

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 17

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17127.11	36430.29
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) ►	17127.11	36430.29

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	117668.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3119.26
25. SUBTOTAL (add Line 23 and Line 24).....	120787.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17127.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	103660.64

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 17

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Philip Dahlheimer

Mailing Address 171 Ultra Dr

City

Henderson

State

NV

Zip Code

89074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Phils Photos

Occupation

Photographer

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4549

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Steve Esh

Mailing Address 1447 Ardent St.

City

Las Vegas

State

NV

Zip Code

89104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		25		2014

Transaction ID : SA11AI.4538

Amount of Each Receipt this Period

270.00

Full Name (Last, First, Middle Initial)

Ivan GoldsmithMailing Address 5375 S. Fort Apache
#103

City

Las Vegas

State

NV

Zip Code

89148

FEC ID number of contributing
federal political committee.

C

Name of Employer

TrimCare

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4550

Amount of Each Receipt this Period

100.00

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:

PAGE 6 OF 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Edwin Kingsley

Mailing Address 2321 Caserta Ct.

City

Henderson

State

NV

Zip Code

89014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Comprehensive Cancer Centers oOccupation
Physician

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4553

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Joel Lubritz

Mailing Address 30 Burning Tree Ct.

City

Las Vegas

State

NV

Zip Code

89113

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lubritz Medical

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2014

Transaction ID : SA11AI.4537

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

John Brett Ottolenghi

Mailing Address 2275 E. Sunset Road

City

Las Vegas

State

NV

Zip Code

89119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Artisanal Food

Occupation

Purveyer

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4571

Amount of Each Receipt this Period

300.00

In-kind - Food, beverage & labor

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

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

1050.00

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 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Randal Peoples

Mailing Address 2760 South Pioneer Way

City

Las Vegas

State

NV

Zip Code

89117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stanford University

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		06		2014

Transaction ID : SA11Al.4485

Amount of Each Receipt this Period

500.00

Donation

Full Name (Last, First, Middle Initial)

B. 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

Full Name (Last, First, Middle Initial)

C. 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).....

500.00

2120.00

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

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

FOR LINE NUMBER: PAGE 8 OF 17

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)

ANNETTE TEIJEIRO

Mailing Address 1916 HOUSTON DRIVE

City

LAS VEGAS

State

NV

Zip Code

89104

FEC ID number of contributing
federal political committee.

C

H4NV01153

Name of Employer
Self

Occupation
Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

103024.15

Date of Receipt

M M / D D / Y Y Y Y
06 **12** **2014**

Transaction ID : SA13A.4566

Amount of Each Receipt this Period

32.26

Loan from personal funds

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
☐ Other (specify)

☐ General

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
☐ Other (specify)

☐ General

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).....

32.26

32.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 17

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

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CBSRadio

Mailing Address 7255 South Tenaya Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2014

City	State	Zip Code
Suite 100	NV	89113

Amount of Each Disbursement this Period

3200.00

Purpose of Disbursement

004

Transaction ID : SB17.4520

Candidate Name

ANNETTE TEIJEIRO FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NV District: 01

Full Name (Last, First, Middle Initial)

B. Dane & Associates

Mailing Address P.O. Box 270185

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
Louisville	CO	80027

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
FEC ReportingCategory/
Type**Transaction ID : SB17.4486**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. Dane & Associates

Mailing Address P.O. Box 270185

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
Louisville	CO	80027

Amount of Each Disbursement this Period

579.85

Purpose of Disbursement
ConsultantCategory/
Type**Transaction ID : SB17.4487**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

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

4079.85

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 17

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

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. El Concilio Hispano AdvertisingMailing Address 8797 Tom Noon Avenue
Unit 103

City Las Vegas State NV Zip Code 89178

Purpose of Disbursement
Advertisement

004

Category/
Type

Candidate Name

ANNETTE TEIJEIRO FOR CONGRESSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: NV District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2014

Amount of Each Disbursement this Period

1750.00

Transaction ID : SB17.4521

B. Inspired Social, LLC

Mailing Address 10013 Mission Creek Inn St.

City Las Vegas State NV Zip Code 89178

Purpose of Disbursement
Social Media Consultant

004

Category/
Type

Candidate Name

ANNETTE TEIJEIRO FOR CONGRESSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify)

State: NV District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

Amount of Each Disbursement this Period

834.69

Transaction ID : SB17.4535

C. Johny Jackson & Associates

Mailing Address 1405 Vegas Valley Drive

City Las Vegas State NV Zip Code 89169

Purpose of Disbursement
Consultant

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4517

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

2884.69

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 17

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

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Johnny Jackson & Associates

Mailing Address 1405 Vegas Valley Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2014

City	State	Zip Code
Las Vegas	NV	89169

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
Consultant

001

Transaction ID : SB17.4522

Candidate Name

ANNETTE TEIJEIRO FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NV District: 01

Full Name (Last, First, Middle Initial)

B. Johnny Jackson & Associates

Mailing Address 1405 Vegas Valley Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2014

City	State	Zip Code
Las Vegas	NV	89169

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
Consultant

001

Transaction ID : SB17.4526

Candidate Name

ANNETTE TEIJEIRO FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NV District: 01

Full Name (Last, First, Middle Initial)

C. Johnny Jackson & Associates

Mailing Address 1405 Vegas Valley Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

City	State	Zip Code
Las Vegas	NV	89169

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
Consultant

001

Transaction ID : SB17.4531

Candidate Name

ANNETTE TEIJEIRO FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: NV District: 01

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

900.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 17

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

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Johnny Jackson & Associates

Mailing Address 1405 Vegas Valley Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

City	State	Zip Code
Las Vegas	NV	89169

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
Consultant

001

Transaction ID : SB17.4534

Candidate Name

ANNETTE TEIJEIRO FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: NV District: 01

Full Name (Last, First, Middle Initial)

B. Office Max

Mailing Address 2100 E. Serene Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
Las Vegas	NV	89123

Amount of Each Disbursement this Period

572.87

Purpose of Disbursement
Printing supplies

001

Transaction ID : SB17.4516

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. John Brett Ottolenghi

Mailing Address 2275 E. Sunset Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

City	State	Zip Code
Las Vegas	NV	89119

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
In-kind - Food, beverage & laborCategory/
Type**Transaction ID : SB17.4572**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: District:

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

1172.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 17

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

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)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Tim Williams

Mailing Address 3305 S. Jones Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
Las Vegas	NV	89108

Amount of Each Disbursement this Period

828.71

Purpose of Disbursement
Consultant

001

Transaction ID : SB17.4515

Candidate Name

ANNETTE TEIJEIRO FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: ☒ Primary ☐ General
☐ Other (specify)

State: NV District: 01

Full Name (Last, First, Middle Initial)

B. Tim Williams

Mailing Address 3305 S. Jones Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2014

City	State	Zip Code
Las Vegas	NV	89108

Amount of Each Disbursement this Period

770.00

Purpose of Disbursement
Consultant

001

Transaction ID : SB17.4529

Candidate Name

ANNETTE TEIJEIRO FOR CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: NV District: 01

Full Name (Last, First, Middle Initial)

c. United States Postal Service

Mailing Address Sunset Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

City	State	Zip Code
Las Vegas	NV	89193

Amount of Each Disbursement this Period

192.00

Purpose of Disbursement
Postal

006

Transaction ID : SB17.4519

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

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

1790.71

SCHEDULE C (FEC Form 3)
LOANS

PAGE 15 OF 17

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4303

ANNETTE TEIJEIRO FOR CONGRESS

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

[PERSONAL FUNDS]

Election: 2014

ANNETTE TEIJEIRO

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1916 HOUSTON DRIVE

City

State

ZIP Code

LAS VEGAS

NV

89104

Original Amount of Loan

2991.89

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2991.89

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 01 / 2013

Date Due

M M / D D / Y Y Y Y
/ / 2018

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)..... ►

2991.89

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

PAGE 16 OF 17

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4304

ANNETTE TEIJEIRO FOR CONGRESS

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

[PERSONAL FUNDS]

Election: 2014

ANNETTE TEIJEIRO

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1916 HOUSTON DRIVE

City

State

ZIP Code

LAS VEGAS

NV

89104

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

M M / D D / Y Y
03 / 31 / 2014

Date Due

M M / D D / Y Y
/ / 2018

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)..... ►

100000.00

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

PAGE 17 OF 17

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4566

ANNETTE TEIJEIRO FOR CONGRESS

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

ANNETTE TEIJEIRO

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1916 HOUSTON DRIVE

City

State

ZIP Code

LAS VEGAS

NV

89104

Original Amount of Loan

32.26

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

32.26

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 12 / 2014

Date Due

M M / D D / Y Y Y Y

Interest Rate

% (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)..... ►

32.26

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

103024.15

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