

KMIEC CONGRESS 2014
DOUGLAS W. KMIEC
26666 SEAGULL WAY-UNIT#C-103
MALIBU, CA 90265

RECEIVED
2014 APR 21 AM 11:34
FEC MAIL CENTER

April 15, 2014

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

Re: FEC I.D. #00556050

Dear Sir or Madam:

We are enclosing Form FEC 3, Report of Receipts and Disbursements for the period 01/01/2014 to 03/31/2014 for the Committee KMEIC CONGRESS 2014.

Thank you for your consideration.

Yours Very Truly,



Thomas C. Thomas
Treasurer

14031223940

FEC
FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

2014 APR 21 AM 11:34

FEC COMMISSION CENTER

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

KMIEC CONGRESS 2014

ADDRESS (number and street)

26666 SEAGULL WAY-#C103

☐ Check if different
than previously
reported. (ACC)

MALIBU

C

A

90265

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00556050

3. IS THIS
REPORT

☐

NEW
(N)

OR

☐

AMENDED
(A)

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

01 / 01 / 2014

through

03 / 31 / 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

THOMAS C. THOMAS

Signature of Treasurer

Thomas C. Thomas

Date

04 / 14 / 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

Write or Type Committee Name

KMIEC CONGRESS 2014

Report Covering the Period:

From:

01/01/2014

To:

03/31/2014

	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))	1 7 1 6 2 0 0	1 7 1 6 2 0 0
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1 7 1 6 2 0 0	1 7 1 6 2 0 0
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5 5 7 4 5 2	5 5 7 4 5 2
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	5 5 7 4 5 2	
8. Cash on Hand at Close of Reporting Period (from Line 27)	1 1 5 8 7 4 8	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0 0 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0 0 0	

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

Write or Type Committee Name

KMIEC CONGRESS 2014

Report Covering the Period:

From:

01'01'2014

To:

03'31'2014

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)

(ii) Unitemized

(iii) TOTAL of contributions from individuals ▶

(b) Political Party Committees

(c) Other Political Committees (such as PACs)

(d) The Candidate

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

1 6 6 6 2 0 0

1 6 6 6 2 0 0

5 0 0 0 0

1 7 1 6 2 0 0

1 6 6 6 2 0 0

1 6 6 6 2 0 0

5 0 0 0 0

1 7 1 6 2 0 0

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0 0 0

0 0 0

13. LOANS:

(a) Made or Guaranteed by the Candidate

(b) All Other Loans

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

0 0 0

0 0 0

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0 0 0

0 0 0

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)

1 7 1 6 2 0 0

1 7 1 6 2 0 0

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

5 5 7 4 5 2

5 5 7 4 5 2

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate.....

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

(b) Political Party Committees

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

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

21. OTHER DISBURSEMENTS

22. TOTAL DISBURSEMENTS
(add Lines 17, 18, 19(c), 20(d), and 21) ►

5 5 7 4 5 2

5 5 7 4 5 2

III. CASH SUMMARY

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

0 0 0

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

1 7 1 6 2 0 0

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

1 7 1 6 2 0 0

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

5 5 7 4 5 2

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

1 1 5 8 7 4 8

14031223944

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE		OF	
☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 12	☐ 13a
☐ 13b	☐ 14	☐ 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)

KMIEC CONGRESS 2014

Full Name (Last, First, Middle Initial)

A. KMIEC, DOUGLAS W.

Mailing Address

26666 SEAGULL WAY-#C-103

City

MALIBU

State

CA

Zip Code

90265

FEC ID number of contributing federal political committee.

C00556050

Name of Employer

PEPPERDINE UNIVERSITY

Occupation

PROFESSOR

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

01/21/2014

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. WEINER, PETER C.

Mailing Address

1250 PALISADES ROAD

City

SANTA MONICA

State

CA

Zip Code

90401-4538

FEC ID number of contributing federal political committee.

C00556050

Name of Employer

LAWYER

Occupation

SOCIAL ENTREPRENEUR

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

01/27/2014

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. GALLEGOS, MARGARET

Mailing Address

1250 PALISADES ROAD

City

SANTA MONICA

State

CA

Zip Code

90401-4538

FEC ID number of contributing federal political committee.

C00556050

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

01/27/2014

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

14031223945

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE		OF	
☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 12	☐ 13a
☐ 12	☐ 13a	☐ 13b	☐ 14	☐ 15	

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NAME OF COMMITTEE (In Full)

KMIEC CONGRESS 2014

Full Name (Last, First, Middle Initial)

A. **ALDER, LOU**

Mailing Address

2969 VILLA COSTERE

City

MALIBU

State

CA

Zip Code

90265

FEC ID number of contributing
federal political committee.

C 0 0 5 5 6 0 5 0

Name of Employer

SELF

Occupation

MUSIC PRODUCER

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

0 1 / 3 0 / 2 0 1 4

Amount of Each Receipt this Period
2 5 0 0 0 0

Full Name (Last, First, Middle Initial)

B. **KMIEC, WARREN W.**

Mailing Address

City

State

Zip Code

MOLDOVA

FEC ID number of contributing
federal political committee.

C 0 0 0 5 5 6 0 5 0

Name of Employer

PEACE CORPS

Occupation

VOLUNTEER

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

0 2 / 2 4 / 2 0 1 4

Amount of Each Receipt this Period

5 0 0 0 0

Full Name (Last, First, Middle Initial)

C. **WALLACE, DAVID DR.**

Mailing Address

11600 WILSHIRE BLVD. #200

City

LOS ANGELES.

State

CA

Zip Code

90025

FEC ID number of contributing
federal political committee.

C 0 0 5 5 6 0 5 0

Name of Employer

PHYSICIAN

Occupation

LASIK SURGEON

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

0 2 / 2 4 / 2 0 1 4

Amount of Each Receipt this Period

8 0 0 0 0

SUBTOTAL of Receipts This Page (optional)

3 8 0 0 0 0

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)

KMIEC CONGRESS 2014

Full Name (Last, First, Middle Initial)

GREENFIELD, DEBRA

A.

Mailing Address

23674 MALIBU COLONY

City

MALIBU

State

CA

Zip Code

90265

FEC ID number of contributing
federal political committee.

C 0 0 5 5 6 0 5 0

Name of Employer

U C L A

Occupation

ATTORNEY/PROFESSOR

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

0 2 / 1 4 / 2 0 1 4

Amount of Each Receipt this Period

2,600.00

Full Name (Last, First, Middle Initial)

PHILLIPS, CARTER & SUE

B.

Mailing Address

1501 K. STREET

City

WASHINGTON

State

DC

Zip Code

FEC ID number of contributing
federal political committee.

C 0 0 5 5 6 0 5 0

Name of Employer

SIDLEY & AUSTIN

Occupation

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

0 2 / 2 6 / 2 0 1 4

Amount of Each Receipt this Period

2,600.00

Full Name (Last, First, Middle Initial)

ANN DEMIERI

C.

Mailing Address

6259 EBBTIDE WAY

City

MALIBU

State

CA

Zip Code

90265

FEC ID number of contributing
federal political committee.

C 00556050

Name of Employer

Occupation

HOUSEWIFE

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

0 2 / 2 7 / 2 0 1 4

Amount of Each Receipt this Period

502.00

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

5,302.00

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

14031223947

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE OF

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

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NAME OF COMMITTEE (In Full)

KMIEC CONGRESS 2014

Full Name (Last, First, Middle Initial)

A. **MARCH, ROY & BARBARA**

Mailing Address

50 MALIBU COLONY

City

MALIBU

State

CA

Zip Code

90265

FEC ID number of contributing
federal political committee.

C 0 0 5 5 6 0 5 0

Name of Employer

EASTOIL SECURED

Occupation

INVESTMENT BANKER

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

0 3 / 1 3 / 2 0 1 4

Amount of Each Receipt this Period

5 2 0 0 0 0

Full Name (Last, First, Middle Initial)

B. **CHEMERINSKY, ERWIN**

Mailing Address

2 HARVEY COURT

City

IRVINE

State

CA

Zip Code

92617

FEC ID number of contributing
federal political committee.

C 0 0 5 5 6 0 5 0

Name of Employer

U C-IRVINE, LAW SCHOOL

Occupation

DEAN & PROFESSOR

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

0 3 / 1 4 / 2 0 1 4

Amount of Each Receipt this Period

5 0 0 0 0 0

Full Name (Last, First, Middle Initial)

C. **GORDON, BERNICE**

Mailing Address

HUTCHINSON

City

CHICAGO

State

IL

Zip Code

FEC ID number of contributing
federal political committee.

C 0 0 5 5 6 0 5 0

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

0 3 / 1 7 / 2 0 1 4

Amount of Each Receipt this Period

5 0 0 0 0 0

SUBTOTAL of Receipts This Page (optional)

6 2 0 0 0 0

TOTAL This Period (last page this line number only)

14031223948

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)

KMIEC CONGRESS 2014

Full Name (Last, First, Middle Initial)

GORDAN, MARY

Mailing Address

1500 N. SANDBURG

City

CHICAGO

State

IL

Zip Code

FEC ID number of contributing
federal political committee.

000000556050

Name of Employer

BAIRD & WARNER

Occupation

REALTOR

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

03 / 17 / 2014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

BENECKE, GERALD J.

Mailing Address

8400 MILOPOLOMOL ROAD

City

VENTURA

State

CA

Zip Code

93040

FEC ID number of contributing
federal political committee.

C000556050

Name of Employer

Occupation

RETIRED AIRLINE PILOT

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

03 / 20 / 2014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

GAY, JOHN

Mailing Address

3906 FAIRBREEZE CIRCLE

City

WESTLAKE VILLAGE

State

CA

Zip Code

91361

FEC ID number of contributing
federal political committee.

C000556050

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

03 / 29 / 2014

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

14031223949

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE	OF
☐ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

KMIEC CONGRESS 2014

Full Name (Last, First, Middle Initial)

BRUNO, PETER

Mailing Address

6467 ZUMAVIEW PLACE

City

MALIBU

State

CA

Zip Code

90265

FEC ID number of contributing
federal political committee.

C 00556050

Name of Employer

Occupation

RETIRED

POLICEMAN

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

03 / 23 / 2014

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

HAIDER, MONICA

Mailing Address

24255 PACIFIC COAST HWY. #0083

City

MALIBU

State

CA

Zip Code

90265

FEC ID number of contributing
federal political committee.

C 00556050

Name of Employer

Occupation

PEPPERDINE UNIVERSITY

STUDENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

03 / 23 / 2014

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

GIBBS, RICHARD

Mailing Address

6744 DUME DRIVE

City

MALIBU

State

CA

Zip Code

90265

FEC ID number of contributing
federal political committee.

C 00556050

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☒ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

03 / 23 / 2014

Amount of Each Receipt this Period

20.00

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

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

55.00

00.00

14031223950

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)

KMIEC CONGRESS 2014

Full Name (Last, First, Middle Initial)

KMIEC, KEENAN

A.

Mailing Address

235 MUIR STREET

City

VENICE

State

CA

Zip Code

90291

FEC ID number of contributing
federal political committee.

C 0 0 5 5 6 0 5 0

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

0 3 ' 2 2 ' 2 0 1 4

Amount of Each Receipt this Period

2.00

Full Name (Last, First, Middle Initial)

KMIEC, KILEY

B.

Mailing Address

2918 6th STREET #2

City

SANTA MONICA

State

CA

Zip Code

90403

FEC ID number of contributing
federal political committee.

C 0 0 5 5 6 0 5 0

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

0 3 ' 2 2 ' 2 0 1 4

Amount of Each Receipt this Period

1.00

Full Name (Last, First, Middle Initial)

CHERY, CHANG F.

C.

Mailing Address

910 E. 2nd STREET #31

City

LOS ANGELES

State

CA

Zip Code

90012

FEC ID number of contributing
federal political committee.

C 0 0 5 5 6 0 5 0

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

0 3 ' 2 6 ' 2 0 1 4

Amount of Each Receipt this Period

2.00

SUBTOTAL of Receipts This Page (optional)

5.00

TOTAL This Period (last page this line number only)

17162.00

14031223951

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE OF

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

KMIEC, CONGRESS 2014

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

Amount of Each Disbursement this Period

1 6 0 3

A. RALPHS GROCERY COMPANY

Mailing Address

23841 W. MALIBU ROAD

City

MALIBU

State

CA

Zip Code

90265

Purpose of Disbursement

FOOD FOR VOLUNTEER LUNCHEON

Candidate Name

KMIEC, DOUGLAS W.

Category/
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

Amount of Each Disbursement this Period

4 0 4 4 2

B. DI MARKETING GROUP

Mailing Address

23016 LAKE FOREST DRIVE-A260

City

LAGUNA HILLS

State

CA

Zip Code

92653

Purpose of Disbursement

BROUCHURES

Candidate Name

KMEIC, DOUGLAS W.

Category/
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

Amount of Each Disbursement this Period

1 4 0 3 6

C. COSTCO

Mailing Address

5700 LINDERO CYN ROAD

City

WESTLAKE VILLAGE

State

CA

Zip Code

91362

Purpose of Disbursement

FOOD FOR PLANNING MEETING

Candidate Name

KMIEC, DOUGLAS W.

Category/
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional)

5 6 0 8 1

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 OF

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

KMIEC CONGRESS 2014

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address
23709 W.MALIBU ROAD

City **MALIBU** State **CA** Zip Code **90265**

Purpose of Disbursement
ANK CHGS.& FEES

Candidate Name
KMIEC, DOUGLAS W.

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

State: District:

Date of Disbursement

01/30/2014

Amount of Each Disbursement this Period

352.38

B. L A COUNTY REGISTRAR/RECORDER

Mailing Address
12400 IMPERIAL HWY.

City **NORWALK** State **CA** Zip Code

Purpose of Disbursement
PUBLICATION OF CANDIDATE'S STATEMENT

Candidate Name
KMIEC, DOUGLAS W.

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

State: District:

Date of Disbursement

03/04/2014

Amount of Each Disbursement this Period

4000.00

C. VENTURA COUNTY

Mailing Address
COUNTY BLDG. 800 VICTORIA AVE.

City **VENTURA** State **CA** Zip Code **93009-1720**

Purpose of Disbursement
FILING FEE FOR CANDIDATE'S STATEMENT

Candidate Name

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

State: District:

Date of Disbursement

03/26/2014

Amount of Each Disbursement this Period

4175.00

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

4927.38

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

14031223953

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE OF

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

KMIEC CONGRESS 2014

Full Name (Last, First, Middle Initial)

Date of Disbursement

03 / 31 / 2014

A. DI VENTURE MARKETING GROUP

Mailing Address
23016 LAKE FOREST DR.

City LAGUNA HILLS State CA Zip Code 92653

Purpose of Disbursement
POSTERS

Candidate Name

Category/
Type

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

State: District:

Amount of Each Disbursement this Period

8,633

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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

State: District:

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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

State: District:

Amount of Each Disbursement this Period

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

8,633

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

5,574.52

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE OF

FOR LINE NUMBER:
(check only one)

13a
13b

NAME OF COMMITTEE (In Full)

KMIEC CONGRESS 2014

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

NONE

Election:

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M /

D D /

Y Y Y Y

M M /

D D /

Y Y Y Y

% (apr)

% (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).....

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-1 (FEC Form 3)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for
Information found on
Page ____ of Schedule C

NAME OF COMMITTEE (In Full) KMIEC CONGRESS 2014		FEC IDENTIFICATION NUMBER C 0 0 5 5 6 0 5 0	
LENDING INSTITUTION (LENDER) Full Name NONE		Amount of Loan 	
Mailing Address		Interest Rate (APR) %	
City State Zip Code		Date Incurred or Established M M D D Y Y Y Y Date Due M M D D Y Y Y Y	
A. Has loan been restructured? ☐ No ☐ Yes If yes, date originally incurred M M D D Y Y Y Y			
B. If line of credit, Amount of this Draw:		Total Outstanding Balance:	
C. Are other parties secondarily liable for the debt incurred? ☐ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? ☐ No ☐ Yes If yes, specify: _____		What is the value of this collateral? Does the lender have a perfected security interest in it? ☐ No ☐ Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? ☐ No ☐ Yes If yes, specify: _____		What is the estimated value? 	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: M M D D Y Y Y Y		Location of account: Address: _____ City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE M M D D Y Y Y Y	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE M M D D Y Y Y Y	
Title			

14031223956

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE OF

FOR LINE NUMBER:
(check only one)

9
10

NAME OF COMMITTEE (In Full)

KMIEC CONGRESS 2014

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

NONE

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)

2) TOTALS This Period (last page this line number only)

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

FEC FORM 3Z (File with Form 3)
CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (in Full)		Report Covering Period:	
KMIEC CONGRESS 2014		From:	To:
		0 1 / 0 1 / 2 0 1 4	0 3 / 3 1 / 2 0 1 4

Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A	KMIEC CONGRESS 2014	16662.00	
B	Column Total Last Page Only.....		

	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A		500.00	17162.00			
B						

	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A				17162.00	5574.52	
B						

	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A						
B						

	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A			5574.52			
B						

	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures
A			5574.52
B			

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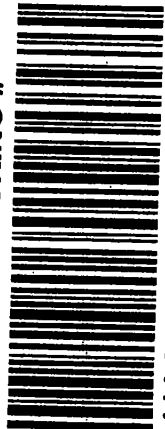
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	4/21/14
PREPARER (8/2013)	DATE PREPARED

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