

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

RECEIVED
2012 JUL 20 AM 11:20
Office Use Only
FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

ALBERT MAXWELL GOLDBERG FOR CONGRESS

ADDRESS (number and street)
X Check if different than previously reported. (ACC)

1169 SHELburn LANE
NENTURA CA 93991-14054

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE STATE DISTRICT

C 00517029 CA 26

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)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on MM/DD/YYYY in the State of CA

Termination Report (TER)

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

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

Election on MM/DD/YYYY in the State of CA

5. Covering Period 3/7/2012 through 6/6/2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer ALBERT MAXWELL GOLDBERG

Signature of Treasurer [Signature] Date 7/16/2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

12030854979

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

ALBERT MAXWELL GOLDBERG FOR CONGRESS

Report Covering the Period: From:

M 3 / D D 7 / Y Y Y Y 2012

To:

M M 6 / D D 15 / Y Y Y Y 2012

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))

745.00

745.00

(b) Total Contribution Refunds
(from Line 20(d))

0

0

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

745.00

745.00

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

11,658.75

11,658.75

(b) Total Offsets to Operating
Expenditures (from Line 14)

0

0

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

11,658.75

11,658.75

8. Cash on Hand at Close of
Reporting Period (from Line 27)

0

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

0

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

0

For further information contact:

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

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

12030854980

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

ALBERT MAXWELL GOLDBERG FOR CONGRESS

Report Covering the Period: From: **3 / 7 / 2012** To: **6 / 5 / 2012**

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))..

500.00
245.00
745.00
Ø
Ø
Ø
745.00

500.00
245.00
745.00
Ø
Ø
Ø
745.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

Ø

Ø

13. LOANS:

- (a) Made or Guaranteed by the Candidate.....
- (b) All Other Loans.....
- (c) TOTAL LOANS (add Lines 13(a) and (b)).....

11,386.94
Ø
11,386.94

11,386.94
Ø
11,386.94

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

Ø

Ø

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

Ø

Ø

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

12,131.94

12,131.94

12030854981

**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.....

11,658.75

11,658.75

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0

0

19. LOAN REPAYMENTS:

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

473.19

473.19

(b) Of All Other Loans

0

0

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

473.19

473.19

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0

0

(b) Political Party Committees.....

0

0

(c) Other Political Committees
(such as PACs)

0

0

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

0

0

21. OTHER DISBURSEMENTS

0

0

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

12,131.94

12,131.94

III. CASH SUMMARY

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

0

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

12,131.94

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

12,131.94

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

12,131.94

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

0

12030854982

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

ALBERT MAXWELL GOLDBERG FOR CONGRESS

Full Name (Last, First, Middle Initial)

BLACK, STANLEY

A. Mailing Address

433 NORTH CAMDEN DRIVE

City **BEVERLY HILLS** State **CA** Zip Code **90210**

Date of Receipt

3 30 2012

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

500.00

Name of Employer
SELF EMPLOYED

Occupation
REAL ESTATE

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Full Name (Last, First, Middle Initial)

B. Mailing Address

City State Zip Code

Date of Receipt

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Full Name (Last, First, Middle Initial)

C. Mailing Address

City State Zip Code

Date of Receipt

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

500.00

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

500.00

12030854983

**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 1 OF 6

<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)

ALBERT MAXWELL GOLDBERG FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DEBRA BOWEN SECRETARY OF STATE

Mailing Address: **1500 11TH STREET**

City: **SACRAMENTO** State: **CA** Zip Code: **95814**

Purpose of Disbursement: **FILING FEE SECRETARY OF STATE**

Candidate Name: **ALBERT MAXWELL GOLDBERG**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **CA** District: **26**

Date of Disbursement

3 / 7 / 2012

Amount of Each Disbursement this Period

1,740.00

B. VENTURA COUNTY ELECTIONS DIVISION

Mailing Address: **800 SOUTH VICTORIA**

City: **VENTURA** State: **CA** Zip Code: **93009**

Purpose of Disbursement: **ELECTION BOOKLET TO PUBLISH CANDIDATES STATEMENT**

Candidate Name: **ALBERT MAXWELL GOLDBERG**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **CA** District: **26**

Date of Disbursement

3 / 8 / 2012

Amount of Each Disbursement this Period

3,500.00

C. HAMMAMI, SALEM

Mailing Address: **1012 S. OXNARD BLVD**

City: **OXNARD** State: **CA** Zip Code: **93030**

Purpose of Disbursement: **WEB DESIGN + MAINTENANCE COMPANY**

Candidate Name: **ALBERT MAXWELL GOLDBERG**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **CA** District: **26**

Date of Disbursement

4 / 2 / 2012

Amount of Each Disbursement this Period

250.00

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

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

5,490.00

10,424.32

12030854984

**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 <u>2</u> OF <u>6</u>
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

12030854985

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NAME OF COMMITTEE (In Full)
ALBERT MAXWELL GOLDBERG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HAMMAMI, SALEM		Date of Disbursement 4 9 2012
Mailing Address 1012 S. OXNARD BLVD.		Amount of Each Disbursement this Period 250.00
City OXNARD	State CA	
Zip Code 93030		Category/ Type
Purpose of Disbursement WEB DESIGN + MAINTENANCE COMPANY		
Candidate Name ALBERT MAXWELL GOLDBERG		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: CA District: 26		

Full Name (Last, First, Middle Initial) B. DATA DEPOT		Date of Disbursement 4 12 2012
Mailing Address 6822 22ND AVENUE NORTH SUITE 284		Amount of Each Disbursement this Period 355.50
City ST. PETERSBURG, FL	State FL	
Zip Code 33710		Category/ Type
Purpose of Disbursement CONTRIBUTOR LIST SUPPLIER		
Candidate Name ALBERT MAXWELL GOLDBERG		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: CA District: 26		

Full Name (Last, First, Middle Initial) C. VISTA PRINT		Date of Disbursement 4 16 2012
Mailing Address 95 HAYDEN AVE.		Amount of Each Disbursement this Period 259.40
City LEXINGTON	State MA	
Zip Code 02421		Category/ Type
Purpose of Disbursement BUSINESS CARDS		
Candidate Name ALBERT MAXWELL GOLDBERG		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: CA District: 26		

SUBTOTAL of Disbursements This Page (optional).....	864.90
TOTAL This Period (last page this line number only).....	10,424.32

**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)			
	<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)
ALBERT MAXWELL GOLDBERG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HAMMAMI, SALEM		Date of Disbursement 4 16 2012
Mailing Address 1012 S. OXNARD BLVD		Amount of Each Disbursement this Period 250.00
City OXNARD	State CA	
Zip Code 93030		Category/ Type
Purpose of Disbursement WEB DESIGN + MAINTENANCE COMPANY		
Candidate Name ALBERT MAXWELL GOLDBERG		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 26	

Full Name (Last, First, Middle Initial) B. HAMMAMI, SALEM		Date of Disbursement 4 20 2012
Mailing Address 1012 S. OXNARD BLVD		Amount of Each Disbursement this Period 250.00
City OXNARD	State CA	
Zip Code 93030		Category/ Type
Purpose of Disbursement WEB DESIGN + MAINTENANCE COMPANY		
Candidate Name ALBERT MAXWELL GOLDBERG		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 26	

Full Name (Last, First, Middle Initial) C. 2 LINKED / ZURVITA HOLDINGS, INC.		Date of Disbursement 4 20 2012
Mailing Address 485 N. KELLER ROAD SUITE 450		Amount of Each Disbursement this Period 249.95
City MAITLAND	State FL	
Zip Code 32751		Category/ Type
Purpose of Disbursement POLITICAL INTERNET MARKETING + FACEBOOK PAGE		
Candidate Name ALBERT MAXWELL GOLDBERG		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 26	

SUBTOTAL of Disbursements This Page (optional).....	749.95
TOTAL This Period (last page this line number only).....	10,424.32

12030854986

**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 4 OF 6	
	<input checked="" type="checkbox"/> 17- 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

12030854987

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NAME OF COMMITTEE (In Full)
ALBERT MAXWELL GOLDBERG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VISTA PRINT		Date of Disbursement M M D Y 4 26 2012
Mailing Address 95 HAYDEN AVENUE		Amount of Each Disbursement this Period 353.16
City LEXINGTON	State MA	
Zip Code 02421		Category/ Type
Purpose of Disbursement BUSINESS CARDS		
Candidate Name ALBERT MAXWELL GOLDBERG		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 26	

Full Name (Last, First, Middle Initial) B. VISTA PRINT		Date of Disbursement M M D Y 5 5 2012
Mailing Address 95 HAYDEN AVENUE		Amount of Each Disbursement this Period 353.16
City LEXINGTON	State MA	
Zip Code 02421		Category/ Type
Purpose of Disbursement BUSINESS CARDS		
Candidate Name ALBERT MAXWELL GOLDBERG		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 26	

Full Name (Last, First, Middle Initial) C. COLBY POSTER		Date of Disbursement M M D Y 5 16 2012
Mailing Address 1332 W. 12TH PLACE		Amount of Each Disbursement this Period 900.00
City LOS ANGELES	State CA	
Zip Code 90015		Category/ Type
Purpose of Disbursement SIGNS		
Candidate Name ALBERT MAXWELL GOLDBERG		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 26	

SUBTOTAL of Disbursements This Page (optional).....	1,606.32
TOTAL This Period (last page this line number only).....	10,424.32

**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 5 OF 6

<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)

ALBERT MAXWELL GOLDBERG FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.

TORERO PRINTING

Mailing Address

1000 BUSINESS CENTER DR #100

City

NEWBURY PARK

State

CA

Zip Code

91320

Purpose of Disbursement

BUSINESS CARDS

Candidate Name

ALBERT MAXWELL GOLDBERG

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: **CA**

District: **26**

Full Name (Last, First, Middle Initial)

Date of Disbursement

5 16 2012

Amount of Each Disbursement this Period

448.31

B.

2 LINKED/ZURVITA HOLDINGS, INC.

Mailing Address

485 N. KELLER ROAD SUITE 450

City

MAITLAND

State

FL

Zip Code

32751

Purpose of Disbursement

INTERNET MARKETING POLITICAL FACEBOOK PAGE

Candidate Name

ALBERT MAXWELL GOLDBERG

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: **CA**

District: **26**

Full Name (Last, First, Middle Initial)

Date of Disbursement

5 20 2012

Amount of Each Disbursement this Period

249.95

C.

TORERO PRINTING

Mailing Address

1000 BUSINESS CENTER DR #100

City

NEWBURY PARK

State

CA

Zip Code

91320

Purpose of Disbursement

BUSINESS CARDS

Candidate Name

ALBERT MAXWELL GOLDBERG

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: **CA**

District: **26**

Full Name (Last, First, Middle Initial)

Date of Disbursement

5 29 2012

Amount of Each Disbursement this Period

215.57

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

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

913.83
10,424.32

12030854988

**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 6 OF 6			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)
ALBERT MAXWELL GOLDBERG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COLBY POSTER		Date of Disbursement 5 29 2012
Mailing Address 1332 W. 12TH PLACE		Amount of Each Disbursement this Period 799.32
City LOS ANGELES	State CA	
Zip Code 90015		Category/ Type
Purpose of Disbursement SIGNS		
Candidate Name ALBERT MAXWELL GOLDBERG		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 26	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	799.32
TOTAL This Period (last page this line number only).....	10,424.32

12030854989

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full)
ALBERT MAXWELL GOLDBERG FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) GOLDBERG, ALBERT M. (CANDIDATE'S PERSONAL FUNDS)	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1169 SHELBURN LANE	

City VENTURA	State CA	ZIP Code 93001
------------------------	--------------------	--------------------------

Original Amount of Loan 11,386.94	Cumulative Payment To Date 4,731.9	Balance Outstanding at Close of This Period 0
---	--	---

TERMS	Date Incurred 3 / 7 / 2012	Date Due 0 / 0 / 0	Interest Rate 0 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	--------------------------------------	------------------------------	-----------------------------------	---

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

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

SUBTOTALS This Period This Page (optional)..... ▶	
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.

12030854990

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

16675805021

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7/16/12
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

AAO
PREPARER
 (3/2005)

7/20/12
DATE PREPARED