

**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

MEL LEVEY FOR CONGRESS

ADDRESS (number and street)

2303 WESTWOOD DRIVE

Check if different
than previously
reported. (ACC)

MERCED

CA

95340

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00551028

3. IS THIS
REPORTNEW
(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
06 / 03 / 2014in 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
04 / 01 / 2014

through

M M / D D / Y Y Y Y
05 / 14 / 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 CATHY GATEWOOD

Signature of Treasurer

CATHY GATEWOOD

[Electronically Filed]

Date

M M / D D / Y Y Y Y
05 / 22 / 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)

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Write or Type Committee Name

MEL LEVEY FOR CONGRESS

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		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))....	1950	25875
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1950	25875
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3236.08	27271.56
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3236.08	27271.56
8. Cash on Hand at Close of Reporting Period (from Line 27).....	8911.44	
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)	15000	

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

MEL LEVEY FOR CONGRESS

Report Covering the Period:

From:

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

To:

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

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).....

1700

20250

(ii) Unitemized.....

250

5625

(iii) TOTAL of contributions from individuals ▶

1950

25875

(b) Political Party Committees.....

0

0

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

0

0

(d) The Candidate.....

0

0

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

1950

25875

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0

0

13. LOANS:

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

0

10000

(b) All Other Loans.....

0

0

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

0

10000

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

0

0

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

0

308

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

1950

36183

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3236.08	27271.56
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
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) ►	3236.08	27271.56

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	10197.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1950
25. SUBTOTAL (add Line 23 and Line 24).....	12147.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3236.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8911.44

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 9

☒ 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)
MEL LEVEY FOR CONGRESS

Full Name (Last, First, Middle Initial) JEFFREY HAMILTON			Date of Receipt M M / D D / Y Y Y Y 04 / 06 / 2014	
Mailing Address 53 WOODLAWN TERRACE			Transaction ID : SA11AI.C4535619	
City FREDERICKSBURG	State VA	Zip Code 22405	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Name of Employer USMC		
		Occupation MILITARY OFFICER		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) BERENT ISENBERG			Date of Receipt M M / D D / Y Y Y Y 04 / 28 / 2014	
Mailing Address 2875 EVELYN CT			Transaction ID : SA11AI.C4537186	
City MERCED	State CA	Zip Code 95348	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Name of Employer N/A		
		Occupation RETIRED		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) PATRICK MCCORMICK			Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 3700 ITHACA CT			Transaction ID : SA11AI.C4537190	
City MERCED	State CA	Zip Code 95348	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Name of Employer ST PATRICK PARISH		
		Occupation REV MONSIGNOR		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 200		

SUBTOTAL of Receipts This Page (optional).....	1200.00
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)

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

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NAME OF COMMITTEE (In Full)
MEL LEVEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DANA RICHARDS		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2014	
Mailing Address 1624 N ARBOLEDA DR		Transaction ID : SA11Al.C4537185	
City MERCED	State CA	Zip Code 95340	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer N/A	Occupation RANCHER		
Receipt For: 2014 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date _____ 500		
B. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address		_____	
City	State	Zip Code	Amount of Each Receipt this Period _____
FEC ID number of contributing federal political committee. C _____			
Name of Employer	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date _____		
C. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address		_____	
City	State	Zip Code	Amount of Each Receipt this Period _____
FEC ID number of contributing federal political committee. C _____			
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).....		_____ 1700.00	

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

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

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NAME OF COMMITTEE (In Full)

MEL LEVEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CLENDENIN BIRD & COMPANYMailing Address 3501 TULLY RD
STE B

City Modesto State CA Zip Code 95356

Purpose of Disbursement
PROFESSIONAL FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	08	2014

Amount of Each Disbursement this Period

265.00

Transaction ID : SB17.E1581435

B. CLENDENIN BIRD & COMPANYMailing Address 3501 TULLY RD
STE B

City Modesto State CA Zip Code 95356

Purpose of Disbursement
PROFESSIONAL SERVICES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
05	14	2014

Amount of Each Disbursement this Period

175.00

Transaction ID : SB17.E1583954

C. MERIDIAN PACIFIC, INC.

Mailing Address 925 UNIVERSITY AVENUE

City SACRAMENTO State CA Zip Code 95825

Purpose of Disbursement
CAMPAIGN SIGNS

006

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
05	01	2014

Amount of Each Disbursement this Period

2698.83

Transaction ID : SB17.E1582632

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

3138.83

3138.83

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.L557480

MEL LEVEY FOR CONGRESS

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

MELVIN LEVEY

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2303 WESTWOOD DRIVE

City

State

ZIP Code

MERCED

CA

95340

Original Amount of Loan

10000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

10000

TERMS

Date Incurred

M M / D D / Y Y Y Y
10 / 25 / 2013

Date Due

M M / D D / Y Y Y Y
11/30/2014

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)..... ►

10000.00

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

10000.00

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

MEL LEVEY FOR CONGRESS

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

CLENDENIN BIRD & COMPANYNature of Debt (Purpose):
PROFESSIONAL FEESMailing Address 3501 TULLY RD
STE BCity State Zip Code
Modesto CA 95356

Outstanding Balance Beginning This Period

265

Transaction ID : SD10.E1581434

Amount Incurred This Period

0

Payment This Period

265

Outstanding Balance at Close of This Period

0

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

MERIDIAN PACIFIC, INC.Nature of Debt (Purpose):
CONSULTING SERVICES

Mailing Address 925 UNIVERSITY AVENUE

City State Zip Code
SACRAMENTO CA 95825

Outstanding Balance Beginning This Period

0

Transaction ID : SD10.E1582256

Amount Incurred This Period

5000

Payment This Period

0

Outstanding Balance at Close of This Period

5000

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) ▶

5000.00

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

5000.00

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

10000.00

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

15000.00