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FEC
FORM 3

REPORT OF RECEIPTS
AND DISBURSEMENTS
For An Authorized Committee

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

Committee to Elect Bill Jensen

ADDRESS (number and street) PQ 400348
Check if different than previously reported. (ACC) Hesperia CA 92340

2. FEC IDENTIFICATION NUMBER C 00512800
3. IS THIS REPORT X NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT CA 08

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
X 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:
X Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
Election on 06 / 05 / 2012 In the State of CA
(c) 30-Day POST-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on / / 2012 In the State of

5. Covering Period 01 / 01 / 2012 through 03 / 31 / 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 Stephanie Maguire

Signature of Treasurer Stephanie Maguire Date 04 / 11 / 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.

Office Use Only
FEC FORM 3 (Revised 02/2003)

12030773985

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

Committee to Elect Bill Jensen

Report Covering the Period: From:

MM / DD / YYYY
01 / 01 / 2012

To:

MM / DD / YYYY
03 / 31 / 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))	10170.90	10170.90
(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))	10170.90	10170.90
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	15217.16	15217.16
(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))	15217.16	15217.16
8. Cash on Hand at Close of Reporting Period (from Line 27)	953.74	
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)	0.00	

For further information contact:

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

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

12030773986

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Committee to Elect Bill Jensen

Report Covering the Period: From: 01 / 01 / 2012 To: 03 / 31 / 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).....	10125.90	10125.90
(ii) Unitemized.....	45.00	45.00
(ii) TOTAL of contributions from individuals.....	10170.90	10170.90
(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)(ii), (b), (c), and (d))..	10170.90	10170.90
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	6000.00	6000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	6000.00	6000.00
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).....		
	16170.90	16170.90

FESAND16

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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.....	15217.16	15217.16
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) ►	, 15,217.16	15,217.16

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	16170.90
25. SUBTOTAL (add Line 23 and Line 24).....	16170.90
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15217.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	953.74

FESAND15

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**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 1 OF 9	
<input 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"/> 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)
Committee to Elect Bill Jensen

Full Name (Last, First, Middle Initial) Culbertson, Daniel		Date of Receipt MM / DD / YYYY 03 / 20 / 2012
A. Mailing Address PO Box 1273 City Helendale, CA 92342 State Zip Code		Amount of Each Receipt this Period 193.90
FEC ID number of contributing federal political committee. C		
Name of Employer unk Occupation unk	Election Cycle-to-Date 193.90	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Rothbart, Stanley		Date of Receipt MM / DD / YYYY 03 / 22 / 2012
B. Mailing Address 1801 Avenue of the Stars #920 City Los Angeles, CA 90067 State Zip Code		Amount of Each Receipt this Period 485.20
FEC ID number of contributing federal political committee. C		
Name of Employer Rothbart Development Corp Occupation Development	Election Cycle-to-Date 485.20	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Pinard, Thomas		Date of Receipt MM / DD / YYYY 03 / 27 / 2012
C. Mailing Address PO Box 309 City Wrightwood, CA 92397 State Zip Code		Amount of Each Receipt this Period 96.80
FEC ID number of contributing federal political committee. C		
Name of Employer Retired Occupation US Navy	Election Cycle-to-Date 96.80	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	775.90
TOTAL This Period (last page this line number only).....	

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**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 4 OF 4	
	<input 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

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NAME OF COMMITTEE (In Full)
Committee to Elect Bill Jensen

Full Name (Last, First, Middle Initial) Reddy, Nagarjun Y		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address 18850 Bear Valley Rd		Amount of Each Receipt this Period 2,500.00
City Victorville, CA	State Zip Code 92395	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2,500.00
Name of Employer Desrnt Valley Medical Group	Occupation Physician	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2,500.00	

Full Name (Last, First, Middle Initial) Reddy, Geetha		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 19361 Sea Biscuit Way		Amount of Each Receipt this Period 2,500.00
City Apple Valley, CA	State Zip Code 92308	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2,500.00
Name of Employer Desrnt Valley Medical Group	Occupation Physician	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2,500.00	

Full Name (Last, First, Middle Initial) Jensen, Don		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2012
Mailing Address 15885 Main St Ste 100		Amount of Each Receipt this Period 2,500.00
City Hesperia, Ca	State Zip Code 92345	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2,500.00
Name of Employer Century 21 Rose Realty	Occupation Realtor	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2,500.00	

SUBTOTAL of Receipts This Page (optional).....	7,500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: **PAGE 3 OF 9**
(check only one)
 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)
Committee to Elect Bill Jensen

A. Full Name (Last, First, Middle Initial)
Graham, Michael and Vicky

Mailing Address
18935 Munsee Rd
City State Zip Code
Apple Valley, CA 92308

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2012

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

Amount of Each Receipt this Period
50.00

Name of Employer Occupation
Self Employed Private Investor

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify) , , 50.00

B. Full Name (Last, First, Middle Initial)
McKinney, C

Mailing Address
PO Box 2307
City State Zip Code
Hesperia, CA 92345

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2012

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

Amount of Each Receipt this Period
50.00

Name of Employer Occupation
Retired Fire Inspector

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify) , , 50.00

C. Full Name (Last, First, Middle Initial)
Johnson, Troy

Mailing Address
6888 Lurelane Ave
City State Zip Code
Hesperia, CA 92345

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2012

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

Amount of Each Receipt this Period
100.00

Name of Employer Occupation
USI Pilot

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify) , , 100.00

SUBTOTAL of Receipts This Page (optional)..... 200.00

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

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

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

FOR LINE NUMBER: PAGE 4 OF 9
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Bill Jensen

Full Name (Last, First, Middle Initial) Holland, Bill		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2012	
Mailing Address Peach Ave City State Zip Code Hesperin, CA 92345		Amount of Each Receipt this Period 1,400.00	
FEC ID number of contributing federal political committee. C			
Name of Employer HUSD Occupation School Policeman			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 1,400.00	
Full Name (Last, First, Middle Initial) Kuhn, Robert and Colleen		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2012	
Mailing Address 9224 Cerra Vista St City State Zip Code Apple Valley, CA 92308		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer BC Rock LLC Occupation Owner			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 100.00	
Full Name (Last, First, Middle Initial) Rapponotti, Maraget		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2012	
Mailing Address 931 Cholla City State Zip Code Barstow, CA 92311		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Barstow Community Hospital Occupation RN			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 100.00	
SUBTOTAL of Receipts This Page (optional).....		1,600.00	
TOTAL This Period (last page this line number only).....			

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**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 9

(check only one)
 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)
Committee to Elect Bill Jensen

Full Name (Last, First, Middle Initial) A. Song, Mee Y		Date of Receipt M M / D D / Y Y 03 / 20 / 2012	
Mailing Address 3595 Inland Empire Blvd Ste 220 City State Zip Code Ontario, CA 91784		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed Occupation Business Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 50.00	
Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	
Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional).....		50.00	
TOTAL This Period (last page this line number only).....		50.00	

12030773993

**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)
 17 18 19a 19b
 20a 20b 20c 21

PAGE 6 OF 9

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)
Committee to Elect Bill Jensen

A.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period: \$ _____

Category/Type: _____

B.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period: \$ _____

Category/Type: _____

C.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period: \$ _____

Category/Type: _____

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only)

1203073994

**SCHEDULE C (FEC Form 3)
LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page
 PAGE 7 OF 9
 FOR LINE NUMBER: (check only one) 13a 13b

NAME OF COMMITTEE (In Full)
 Committee to Elect Bill Jensen

LOAN SOURCE Full Name (Last, First, Middle Initial)
 Jensen, Bill
 Election: Primary General Other (specify)

Mailing Address
 PO Box 400346

City Hesperia, Ca 92340 State ZIP Code

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6,000.00	0.00	6,000.00

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) 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) 6,000.00
 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.

12030773995

**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) Committee to Elect Bill Jensen		FEC IDENTIFICATION NUMBER C
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR) %
Mailing Address	Date Incurred or Established	M M / D D / Y Y Y Y
City State Zip Code	Date Due	M M / D D / Y Y Y Y

A. Has loan been restructured? No Yes If yes, date originally incurred

B. If line of credit, Total Outstanding Balance:
Amount of this Draw: ; ;

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).
Location of account: _____
Address: _____
Date account established: M M / D D / Y Y Y Y
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 *Stephanie Maguire* DATE
Signatures *Stephanie Maguire* 04 / 11 / 2012

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		DATE
Typed Name	Title	M M / D D / Y Y Y Y
Signature		

FESAND16

FEC Schedule C-1 (Form 3) (Revised 02/2003)

12030773996

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)
 Committee to Elect Bill Jensen

A. 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

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)	0.00
2) TOTALS This Period (last page this line number)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	6,000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	6,000.00

FEC Schedule D (Form 3) (Revised 02/2003)

FE5AN016

12030773997

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) <i>Committee to Elect Bill Jensen</i>		Report Covering Period: From: <i>01 01 2012</i> To: <i>03 31 2012</i>				
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		<i>7520.90</i>	<i>7520.90</i>			
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	<i>0.00</i>	<i>0.00</i>	<i>10170.90</i>	<i>0.00</i>	<i>6000.00</i>	<i>0.00</i>
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	<i>6000.00</i>	<i>0.00</i>	<i>0.00</i>	<i>10170.90</i>	<i>15217.16</i>	<i>0.00</i>
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	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>
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	<i>0.00</i>	<i>0.00</i>	<i>15217.16</i>	<i>0.00</i>	<i>953.74</i>	<i>0.00</i>
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	<i>6000.00</i>	<i>10170.90</i>	<i>15217.16</i>			
B						

FE5AN016

FEC Form 3Z (Revised 02/2003)

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Federal Election Commission
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