

# 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  
**Montoya for Congress**

ADDRESS (number and street) PO Box 4050  
 Check if different than previously reported. (ACC) Leander TX 78645-4050

2. **FEC IDENTIFICATION NUMBER** ▼ C C00554139 CITY ▲ STATE ▲ ZIP CODE ▲  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) STATE ▼ DISTRICT  
TX 25

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 03 / 04 / 2014 in the State of TX  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on   /   /   in the State of  

5. Covering Period 01 / 01 / 2014 through 02 / 12 / 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 Kay Edwards  
Signature of Treasurer Kay Edwards [Electronically Filed] Date 04 / 03 / 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.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Montoya for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	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))....	1885.38	2011.40
(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)) .....	1885.38	2011.40
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	3272.10	3356.12
(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)).....	3272.10	3356.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	8654.28	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	10000.00	

**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

**Montoya for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1199.00	1199.00
(ii) Unitemized.....	681.38	807.40
(iii) TOTAL of contributions from individuals ▶	1880.38	2006.40
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5.00	5.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1885.38	2011.40
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	10000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	10000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	1885.38	12011.40

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3272.10	3356.12
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 .....	1.00	1.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	3273.10	3357.12

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	10042.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1885.38
25. SUBTOTAL (add Line 23 and Line 24).....	11927.38
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3273.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8654.28

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

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Rumaldo Juarez**

Mailing Address 15261 Pecos River

City State Zip Code  
Corpus Christi TX 78510

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

Name of Employer Occupation  
Retired N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 19 / 2014

**Transaction ID : SA11AI.4133**

Amount of Each Receipt this Period  
500.00

Contribution Check

**B.** Full Name (Last, First, Middle Initial)  
**Law Offices of Mock and Brown**

Mailing Address 400 S. Main

City State Zip Code  
Burnet TX 78611

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 23 / 2014

**Transaction ID : SA11AI.4156**

Amount of Each Receipt this Period  
300.00

Campaign contribution

**C.** Full Name (Last, First, Middle Initial)  
**David Montoya**

Mailing Address 621 Vine Ave

City State Zip Code  
Dunedin FL 34698

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

Name of Employer Occupation  
Sykes Enterprises System Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
399.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 29 / 2014

**Transaction ID : SA11AI.4259**

Amount of Each Receipt this Period  
399.00

In-kind - Nationbuilders payment on credit card

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

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

1199.00

1199.00

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

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NAME OF COMMITTEE (In Full)  
**Montoya for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael L Steenberg**

Mailing Address 2208 Belair Drive

City Granite Shoals State TX Zip Code 78654

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

Name of Employer Self employed Occupation Political Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
46.38

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : SA11C.4165**

Amount of Each Receipt this Period  
5.00

Earmarked through Act Blu

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

5.00

5.00

**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 7 OF 12			
	<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)  
**Montoya for Congress**

Full Name (Last, First, Middle Initial) <b>A. David Montoya</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 621 Vine Ave		Amount of Each Disbursement this Period 399.00 <b>Transaction ID : SB17.4260</b>
City Dunedin State FL Zip Code 34698	Purpose of Disbursement In-kind - Nationbuilders payment on credit card	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael L Steenbergen</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.4119</b>
City Granite Shoals State TX Zip Code 78654	Purpose of Disbursement Contract Labor	
Candidate Name <b>Montoya for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 25		

Full Name (Last, First, Middle Initial) <b>c. Michael L Steenbergen</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 80.00 <b>Transaction ID : SB17.4122</b>
City Granite Shoals State TX Zip Code 78654	Purpose of Disbursement Expenses	
Candidate Name <b>Montoya for Congress</b>	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 25		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	779.00
<b>TOTAL</b> 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 8 OF 12			
	<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)  
**Montoya for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael L Steenbergen</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.4124</b>
City Granite Shoals State TX Zip Code 78654	Purpose of Disbursement Contract labor 001 Category/Type	
Candidate Name <b>Montoya for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 25		

Full Name (Last, First, Middle Initial) <b>B. Michael L Steenbergen</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.4145</b>
City Granite Shoals State TX Zip Code 78654	Purpose of Disbursement Contract labor 001 Category/Type	
Candidate Name <b>Montoya for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 25		

Full Name (Last, First, Middle Initial) <b>c. Michael L Steenbergen</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 80.00 <b>Transaction ID : SB17.4146</b>
City Granite Shoals State TX Zip Code 78654	Purpose of Disbursement Expenses 001 Category/Type	
Candidate Name <b>Montoya for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 25		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	680.00
<b>TOTAL</b> 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 9 OF 12			
	<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)  
**Montoya for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael L Steenbergen</b>		Date of Disbursement MM / DD / YYYY 01 / 28 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 80.00 <b>Transaction ID : SB17.4160</b>
City Granite Shoals	State TX	
Purpose of Disbursement Expenses		Category/ Type 001
Candidate Name <b>Montoya for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 25	

Full Name (Last, First, Middle Initial) <b>B. Michael L Steenbergen</b>		Date of Disbursement MM / DD / YYYY 01 / 28 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.4161</b>
City Granite Shoals	State TX	
Purpose of Disbursement Contract labor		Category/ Type 001
Candidate Name <b>Montoya for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 25	

Full Name (Last, First, Middle Initial) <b>c. Michael L Steenbergen</b>		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 80.00 <b>Transaction ID : SB17.4162</b>
City Granite Shoals	State TX	
Purpose of Disbursement Expenses		Category/ Type 001
Candidate Name <b>Montoya for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 25	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	460.00
<b>TOTAL</b> 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 10 OF 12
	<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)  
**Montoya for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael L Steenbergen</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.4163</b>
City Granite Shoals State TX Zip Code 78654	Purpose of Disbursement Contract labor 001 Category/Type	
Candidate Name <b>Montoya for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 25		

Full Name (Last, First, Middle Initial) <b>B. Michael L Steenbergen</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 21.38 <b>Transaction ID : SB17.4170</b>
City Granite Shoals State TX Zip Code 78654	Purpose of Disbursement In-kind - Purchased Domain Name Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Michael L Steenbergen</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.4171</b>
City Granite Shoals State TX Zip Code 78654	Purpose of Disbursement Contract Labor 001 Category/Type	
Candidate Name <b>Montoya for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 25		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	621.38
<b>TOTAL</b> 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 11 OF 12	
	<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)  
**Montoya for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael L Steenbergen</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 2208 Belair Drive		Amount of Each Disbursement this Period 80.00 <b>Transaction ID : SB17.4172</b>
City Granite Shoals	State TX	
Purpose of Disbursement Expenses		Category/ Type 001
Candidate Name <b>Montoya for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TX	District: 25	

Full Name (Last, First, Middle Initial) <b>B. Worley Printing</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 3217 N. Interstate Hwy 35		Amount of Each Disbursement this Period 404.86 <b>Transaction ID : SB17.4120</b>
City Austin	State TX	
Purpose of Disbursement Printing Push Cards		Category/ Type 006
Candidate Name <b>Montoya for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TX	District: 25	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	484.86
<b>TOTAL</b> This Period (last page this line number only).....	3025.24

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

NAME OF COMMITTEE (In Full) **Montoya for Congress** Transaction ID : **SC/10.4113**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Montoya Marco** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 4806 Pecan Springs Road

City State ZIP Code  
 Austin TX 78723

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred M 12 / D 28 / Y 2013	Date Due M / D / Y 11/30/2014	Interest Rate 0.00 % (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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
<b>TOTALS</b> 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.**