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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		ONSEI		•		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typin er the lines.	g, type	12FE4M5	
Dr. Brad Allen for	Congress					
ADDRESS (number and stre	PO Box 88					
Check if different than previously reported. (ACC)	Summerland				CA 93	3067
2. FEC IDENTIFICATION	ON NUMBER ▼	CITY			STATE A	ZIP CODE
C C00557124		3. IS THIS REPORT	× NEW (N)	OR	AMENDE (A)	STATE ▼ DISTRICT CA L A L
	cterly Report (Q1)) 12-Day PRE	-Election Repo Primary (12P) Convention ()	General (12	
	terly Report (Q2) Quarterly Report (Q3)	Election on	M M /	03	2014	in the CA
January 31 Y	ear-End Report (YE) (c	30-Day POS	T-Election Rep	oort for the	:	
			General (30G	i)	Runoff (30R	Special (30S)
Termination F	Report (TER)	Election on	M M /	D " D	Y " Y " Y " Y	in the State of
5. Covering Period	M M M / D D / Y	2016 Y	through	M 05	/ / D D / 18	Y " Y " Y " Y " Y " Z016 "
I certify that I have examin		e best of my kr	nowledge and I	belief it is	true, correct and	complete.
Type or Print Name of Tre Signature of Treasurer	Bryan Burch Bryan Burch		[Electronically I	Filed]	Date 05	/ D D / Y Y Y Y Y 18 Y 18 2016
NOTE: Submission of false,	erroneous, or incomplete i	nformation may	subject the per	son signing	this Report to the	penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name
Dr. Brad Allen for Congress

R	eport	Covering the Period: From:	04 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M ₀₅ M ₁₈ / P ₁₈ D ₁ / Y ₂₀₁₆ Y ₁ Y ₂ Y ₁ Y ₂ Y ₁ Y ₂ Y ₃ Y 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))	0.00	40521.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	2600.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	37921.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	131817.23
	(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))	0.00	131817.23
8.		sh on Hand at Close of porting Period (from Line 27)	103.77	
9.	the	ots and Obligations Owed TO Committee (Itemize all on ledule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on ledule C and/or Schedule D)	103780.00	

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)

PAGE 3 / 11

Write or Type Committee Name

Dr.	Brad	Allen	for	Congress
-----	------	-------	-----	----------

04 05 2016 01 2016 18 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 40521.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized..... (iii) TOTAL of contributions 0.00 40521.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 0.00 40521.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 94000.00 (b) All Other Loans..... TOTAL LOANS 0.00 94000.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 134521.00 0.00 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

ursements

PAGE 4 / 11

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	131817.23
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	2600.00
	(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	2600.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	134417.23
	III. CASH SU	IMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	103.77
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		103.77
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		103.77

SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

	13a
Y	13h

OANS		for each category of Detailed Summary Pa	
AME OF COMMITTEE (In Fu	•	Transa	action ID : PAYC97
	ne (Last, First, Middle Initial)	Memo Item	Election: 2014
Brad Allen - Person	,	memo nem	Primary General
Mailing Address PO Box 88			Other (specify) ▼
City	State	ZIP Code	
Summerland	CA	93067	
Original Amount of Loan	Cumulative Payr		alance Outstanding at Close of This Period
	20000.00	0.00	20000.00
TERMS Date Incur M 05	red Da	te Due Interest Ra	0.00 % (apr)
List All Endorsers or Gu	arantors (if any) to Loan Source		Yes No
1. Full Name (Last, First,		Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period Thi	is Page (optional)	·····	20000.00
FOTALS This Period (last pa	ge in this line only)	·····	, ,
Carry outstanding balance of	only to LINE 3, Schedule D, for this	line. If no Schedule D, carry for	rward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) L

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

OANS				for each cat Detailed Sur			k only one)	×	13a 13b
NAME OF COMMITTEE (In Fu Dr. Brad Allen for Cou	•		•		Transacti	on ID : PAY	′C64		-
LOAN SOURCE Full Nar Brad Allen - Person	,	dle Initial)		Memo	Item	Election: Primary Genera			
Mailing Address PO Box 88							(specify) \blacktriangledown		
City		State Z	ZIP Code						
Summerland		CA S	93067						
Original Amount of Loan		Cumulative Paym	nent To Dat		Baland	ce Outstand	ding at Close o	_	
	25000.00			0.00			250	0.00	0
TERMS Date Incur M 05 M / 21 D /	red Y Ž014 Y	Date	te Due	Intone Y	terest Rate 0.00	% (Secur	red: /es	X No
List All Endorsers or Gu	arantors (if any) to	Loan Source							
1. Full Name (Last, First,	Middle Initial)		Na	me of Emplo	yer				
Mailing Address			Oc	cupation					
City	State	ZIP Code	Gu	nount laranteed ltstanding:		,	9		
2. Full Name (Last, First,	Middle Initial)		Na	me of Emplo	yer				
Mailing Address			Oc	cupation					
City	State	ZIP Code	Gu	nount laranteed ltstanding:		,	9		
3. Full Name (Last, First,	Middle Initial)		Na	me of Emplo	yer				
Mailing Address			Oc	cupation					
City	State	ZIP Code	Gu	nount paranteed ptstanding:		,	9		
4. Full Name (Last, First,	Middle Initial)		Na	me of Emplo	yer				
Mailing Address			Oc	cupation					
City	State	ZIP Code	Gu	nount laranteed ltstanding:		7	9		
SUBTOTALS This Period Th					<u> </u>		250	00.00	0
TOTALS This Period (last pa		-			carry forwa	ard to appr	opriate line of	Sum	mary.

SCHEDULE C (FEC Form 3) L

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 7

LOANS		Detailed Summary Pa			
NAME OF COMMITTEE (In Full) Dr. Brad Allen for Congress		Transaction ID : PAYC71			
LOAN SOURCE Full Name (Last, First, Mid Brad Allen - Personal Funds	dle Initial)	Memo Item	Election: 2014 Primary General		
Mailing Address PO Box 88			Other (specify)		
City	State ZIP Cod	е			
Summerland	CA 93067				
Original Amount of Loan	Cumulative Payment To I		alance Outstanding at Close of This Period		
11000.00	2 2	0.00	11000.00		
Date Incurred M 05 / P 23 P / Y 2014 Y	Date Due	Interest Ra	tte Secured: 0.00 % (apr) Yes No		
List All Endorsers or Guarantors (if any) to	Loan Source				
Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	7		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	7		
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	9		
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	7		
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only Carry outstanding balance only to LINE 3, Sch)	······	11000.00		

SCHEDULE C (FEC Form 3) LC

Use separate schedule(s)

PAGE

LOANS	for each category of the Detailed Summary Page (check only one) 13a
NAME OF COMMITTEE (In Full) Dr. Brad Allen for Congress	Transaction ID : PAYC73
LOAN SOURCE Full Name (Last, First, Middle Initial) Brad Allen - Personal Funds Mailing Address PO Box 88	Memo Item Election: 2014 Primary General Other (specify) ▼
City State ZIP C	Code
Summerland CA 9306	7
Original Amount of Loan Cumulative Payment 28000.00	To Date Balance Outstanding at Close of This Period 0.00 28000.00
Date Incurred Date Du M 05 M / 27 D / Y 2014 Y M M / D D / Y List All Endorsers or Guarantors (if any) to Loan Source	le Interest Rate Secured: y . YNone 0.00 % (apr) Yes No
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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)	

SCHEDULE C (FEC Form 3)

PAGE 9 OF

AME OF COMMITTEE (In Full) Or. Brad Allen for Congress	dle Initial)	Tra	Insaction ID : PAYC77
T	dle Initial)		
LOAN SOURCE Full Name (Last, First, Midd Brad Allen - Personal Funds		Memo Item	Election: 2014 Primary General
Mailing Address PO Box 88			Other (specify) ▼
City	State ZIP Cod	de	·
Summerland	CA 93067		
Original Amount of Loan	Cumulative Payment To	Date	Balance Outstanding at Close of This Period
3000.00		0.00	3000.00
TERMS Date Incurred	Date Due	Interest	Rate Secured:
M 05 ^M / D 27 ^D / Y 2014 Y	M / D D / Y	Y None	0.00 % (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	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	7
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)		<u>^</u>	3000.00
Carry outstanding balance only to LINE 3. Solve			

SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 10 OF

	13a
$oldsymbol{ abla}$	13h

OANS			each category of the illed Summary Page		13a X 13b
IAME OF COMMITTEE (In Fu		-	Transacti	on ID : PAYC80	100
LOAN SOURCE Full Nam Brad Allen - Person	e (Last, First, Middle Initial) al Funds		Memo Item	Election: 2014 Primary	
Mailing Address PO Box 88				General Other (specify) ▼	
City	State	ZIP Code			
Summerland	CA	93067			
Original Amount of Loan	Cumulative	e Payment To Date	Baland	ce Outstanding at Close o	of This Period 000.00
TERMS Date Incurre	ed	Date Due	Interest Rate 0.00	% (apr)	ured: Yes No
	rantors (if any) to Loan Sou		(=		
1. Full Name (Last, First,	Middle Initial)	Name o	of Employer		
Mailing Address		Occupa	tion		
City	State ZIP Code	Amount Guarant Outstan	teed	y	
2. Full Name (Last, First, N	Middle Initial)	Name o	of Employer		
Mailing Address		Occupa	tion		
City	State ZIP Code	Amount Guarant Outstan	teed	, , , , , ,	
3. Full Name (Last, First, N	Middle Initial)	Name o	of Employer		
Mailing Address		Occupa	tion		
City	State ZIP Code	Amount Guarant Outstan	teed	, , , , , ,	
4. Full Name (Last, First, N	Middle Initial)	Name o	of Employer		
Mailing Address		Оссира	tion		
City	State ZIP Code	Amount Guarant Outstan	teed	y	
SUBTOTALS This Period This	s Page (optional)		····· · · ·	7	000.00
FOTALS This Period (last pag	ge in this line only)			94	000.00
Carry outstanding balance or	nly to LINE 3, Schedule D, for	this line. If no Scheo	dule D, carry forwa	ard to appropriate line of	Summary.

SCHEDULE D (FEC Form 3)

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

PAGE 11 OF

		schedule(s)	FOR LINE NUMBER:	
EBIS AND OBLIGATIONS		for each	(check only one) 9	
cluding Loans		numbered line)	X 10	
ME OF COMMITTEE (In Full)				
Dr. Brad Allen for Con	gress			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose): Filing Fee	
Brad Allen - Personal Funds		Filling Fee		
Mailing Address PO Box 88				
City State	Zip Code			
Summerland	CA 93067			
Outstanding Balance Beginning This Period		Transacti	on ID : PAYD56	
1050.00				
Amount Incurred This David	Downsont This Davied	Outotondi	na Palamas at Class of This Pariss	
Amount Incurred This Period Payment This Period		Outstandi	Outstanding Balance at Close of This Period	
0.00		0.00	1050.00	
3. Full Name (Last, First, Middle Initial) of Debto	or or Creditor	Nature of D	Pebt (Purpose):	
Brad Allen - Personal Funds			Ballot Statement Fees	
Mailing Address PO Box 88				
City State	Zip Code			
Summerland	CA 93067			
Outstanding Balance Beginning This Period		Transacti	on ID : PAYD57	
8730.00				
7 7 7				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00		0.00	8730.00	
			, ,	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	Nature of Debt (Purpose):	
Mailing Address				
City	State Zip Code			
Outstanding Balance Beginning This Period		<u> </u>		
Date Land Land Land Land Land Land Land Land				
9 9 9				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
9 9 9 9	9 9 9		7	
CURTOTALS This Davied This Dags (anti-name)		•	9780.00	
SUBTOTALS This Period This Page (optional)			7 7 7 7	
TOTALS This Period (last page this line number	er only)	>	9780.00	
	0.4		94000.00	

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

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

103780.00