REPORT OF RECEIPTS
AND DISBURSEMENTS
For An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼
Robin Chew for Congress 2014

ADDRESS (number and street)
904 Fallen Leaf Way

Check if different than previously reported. (ACC)
Emerald Hills

2. FEC IDENTIFICATION NUMBER ▼
C C00546978

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)
☐ 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 / 2014

in the State of
CA

(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
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
Mr. Thomas E Montgomery III

Signature of Treasurer
Mr. Thomas E Montgomery III [Electronically Filed]

Date
M M / D D / Y Y Y Y
05 / 16 / 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.
### Robin Chew for Congress 2014

**Report Covering the Period:** From: **04/01/2014** to: **05/14/2014**

<table>
<thead>
<tr>
<th>COLUMNA</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>6. Net Contributions (other than loans)</strong></td>
<td><strong>COLUMNB</strong></td>
</tr>
<tr>
<td>(a) <strong>Total Contributions</strong> (other than loans) (from Line 11(e))</td>
<td><strong>Election Cycle-to-Date</strong></td>
</tr>
<tr>
<td></td>
<td><strong>603.00</strong></td>
</tr>
<tr>
<td>(b) <strong>Total Contribution Refunds</strong> (from Line 20(d))</td>
<td><strong>0.00</strong></td>
</tr>
<tr>
<td>(c) <strong>Net Contributions (other than loans)</strong> (subtract Line 6(b) from Line 6(a))</td>
<td><strong>603.00</strong></td>
</tr>
</tbody>
</table>

| **7. Net Operating Expenditures** | **COLUMNB** |
| (a) **Total Operating Expenditures** (from Line 17) | **1298.75** | **18300.27** |
| (b) **Total Offsets to Operating Expenditures** (from Line 14) | **0.00** | **85.00** |
| (c) **Net Operating Expenditures** (subtract Line 7(b) from Line 7(a)) | **1298.75** | **18215.27** |

| **8. Cash on Hand at Close of Reporting Period** (from Line 27) | **2601.67** |

| **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) | **11943.94** |

---

**For further information contact:**

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

Toll Free 800-424-9530  
Local 202-694-1100
### I. RECEIPTS

11. CONTRIBUTIONS (other than loans) FROM:

<table>
<thead>
<tr>
<th>Description</th>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Individuals/Persons Other Than Political Committees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) Itemized (use Schedule A)</td>
<td>500.00</td>
<td>8100.00</td>
</tr>
<tr>
<td>(ii) Unitemized</td>
<td>103.00</td>
<td>773.00</td>
</tr>
<tr>
<td>(iii) TOTAL of contributions from individuals</td>
<td>603.00</td>
<td>8873.00</td>
</tr>
<tr>
<td>(b) Political Party Committees</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) Other Political Committees (such as PACs)</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(d) The Candidate</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(e) TOTAL CONTRIBUTIONS (other than loans)</td>
<td>603.00</td>
<td>8873.00</td>
</tr>
</tbody>
</table>

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

<table>
<thead>
<tr>
<th>Description</th>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>

13. LOANS:

<table>
<thead>
<tr>
<th>Description</th>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Made or Guaranteed by the Candidate</td>
<td>1292.98</td>
<td>11943.94</td>
</tr>
<tr>
<td>(b) All Other Loans</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) TOTAL LOANS</td>
<td>1292.98</td>
<td>11943.94</td>
</tr>
</tbody>
</table>

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)             | 0.00     | 85.00    |

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) | 1895.98  | 20901.94 |
## II. DISBURSEMENTS

<table>
<thead>
<tr>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total This Period</strong></td>
<td><strong>Election Cycle-to-Date</strong></td>
</tr>
<tr>
<td>OPERATING EXPENDITURES</td>
<td>1298.75</td>
</tr>
<tr>
<td>TRANSFERS TO OTHER AUTHORIZED COMMITTEES</td>
<td>0.00</td>
</tr>
<tr>
<td>LOAN REPAYMENTS:</td>
<td></td>
</tr>
<tr>
<td>(a) Of Loans Made or Guaranteed by the Candidate</td>
<td>0.00</td>
</tr>
<tr>
<td>(b) Of All Other Loans</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) TOTAL LOAN REPAYMENTS</td>
<td>0.00</td>
</tr>
<tr>
<td>(add Lines 19(a) and (b))</td>
<td></td>
</tr>
<tr>
<td>REFUNDS OF CONTRIBUTIONS TO:</td>
<td></td>
</tr>
<tr>
<td>(a) Individuals/Persons Other Than Political Committees</td>
<td>0.00</td>
</tr>
<tr>
<td>(b) Political Party Committees</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) Other Political Committees (such as PACs)</td>
<td>0.00</td>
</tr>
<tr>
<td>(d) TOTAL CONTRIBUTION REFUNDS</td>
<td>0.00</td>
</tr>
<tr>
<td>(add Lines 20(a), (b), and (c))</td>
<td></td>
</tr>
<tr>
<td>OTHER DISBURSEMENTS</td>
<td>0.00</td>
</tr>
<tr>
<td>TOTAL DISBURSEMENTS</td>
<td>1298.75</td>
</tr>
<tr>
<td>(add Lines 17, 18, 19(c), 20(d), and 21)</td>
<td></td>
</tr>
</tbody>
</table>

## III. CASH SUMMARY

<table>
<thead>
<tr>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total This Period</strong></td>
<td><strong>Election Cycle-to-Date</strong></td>
</tr>
<tr>
<td>CASH ON HAND AT BEGINNING OF REPORTING PERIOD</td>
<td>2004.44</td>
</tr>
<tr>
<td>TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)</td>
<td>1895.98</td>
</tr>
<tr>
<td>SUBTOTAL (add Line 23 and Line 24)</td>
<td>3900.42</td>
</tr>
<tr>
<td>TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</td>
<td>1298.75</td>
</tr>
<tr>
<td>CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)</td>
<td>2601.67</td>
</tr>
</tbody>
</table>
### SCHEDULE A (FEC Form 3) - ITEMIZED RECEIPTS

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)**
Robin Chew for Congress 2014

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bill Bowen</td>
<td>M 04 / D 01 / Y 2014</td>
</tr>
</tbody>
</table>

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

**Mailing Address**
278 Mallorca Way

**City**
San Francisco

**State**
CA

**Zip Code**
94123

**Amount of Each Receipt this Period**
500.00

---

**DATE OF RECEIPT**

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

**Name of Employer**
N/A

**Occupation**
Author

**Receipt For:**
2014

**Primary**

**General**

**Other (specify)**

**Election Cycle-to-Date**
500.00

---

**Date of Receipt**

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

**Name of Employer**
N/A

**Occupation**
Author

**Receipt For:**
2014

**Primary**

**General**

**Other (specify)**

**Election Cycle-to-Date**

---

**Date of Receipt**

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

**Name of Employer**
N/A

**Occupation**
Author

**Receipt For:**
2014

**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
### SCHEDULE A (FEC Form 3)

#### ITEMIZED RECEIPTS

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.

<table>
<thead>
<tr>
<th>NAME OF COMMITTEE (In Full)</th>
<th>Robin Chew for Congress 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A.</strong></td>
<td>Date of Receipt</td>
</tr>
<tr>
<td>Full Name (Last, First, Middle Initial)</td>
<td>Mr. Robin Leo Chew</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>904 Fallen Leaf Way</td>
</tr>
<tr>
<td>City</td>
<td>Emerald Hills</td>
</tr>
<tr>
<td>State</td>
<td>CA</td>
</tr>
<tr>
<td>Zip Code</td>
<td>94062-3433</td>
</tr>
<tr>
<td>FEC ID number of contributing federal political committee.</td>
<td>H4CA18060</td>
</tr>
<tr>
<td>Name of Employer</td>
<td>ProU.net</td>
</tr>
<tr>
<td>Occupation</td>
<td>Co-Owner</td>
</tr>
<tr>
<td>Receipt For:</td>
<td>2014</td>
</tr>
<tr>
<td>Primary</td>
<td>☐</td>
</tr>
<tr>
<td>General</td>
<td>☐</td>
</tr>
<tr>
<td>Other (specify)</td>
<td>☐</td>
</tr>
<tr>
<td>Election Cycle-to-Date</td>
<td>10900.96</td>
</tr>
<tr>
<td>Transaction ID</td>
<td>SA13A.4245</td>
</tr>
<tr>
<td>Amount of Each Receipt this Period</td>
<td>250.00</td>
</tr>
<tr>
<td>Loan from candidate</td>
<td></td>
</tr>
</tbody>
</table>

| **B.**                     | Date of Receipt             |
| Full Name (Last, First, Middle Initial) | Mr. Robin Leo Chew |
| Mailing Address | 904 Fallen Leaf Way |
| City | Emerald Hills |
| State | CA |
| Zip Code | 94062-3433 |
| FEC ID number of contributing federal political committee. | H4CA18060 |
| Name of Employer | ProU.net |
| Occupation | Co-Owner |
| Receipt For: | 2014 |
| Primary | ☐ |
| General | ☐ |
| Other (specify) | ☐ |
| Election Cycle-to-Date | 11150.96 |
| Transaction ID | SA13A.4249 |
| Amount of Each Receipt this Period | 250.00 |
| Loan from candidate | |

| **C.**                     | Date of Receipt             |
| Full Name (Last, First, Middle Initial) | Mr. Robin Leo Chew |
| Mailing Address | 904 Fallen Leaf Way |
| City | Emerald Hills |
| State | CA |
| Zip Code | 94062-3433 |
| FEC ID number of contributing federal political committee. | H4CA18060 |
| Name of Employer | ProU.net |
| Occupation | Co-Owner |
| Receipt For: | 2014 |
| Primary | ☐ |
| General | ☐ |
| Other (specify) | ☐ |
| Election Cycle-to-Date | 11943.94 |
| Transaction ID | SA13A.4250 |
| Amount of Each Receipt this Period | 792.98 |
| Loan from candidate | |

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

FEC Schedule A (Form 3) (Revised 02/2009)
**ITEMIZED DISBURSEMENTS**

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)
Robin Chew for Congress 2014

Full Name (Last, First, Middle Initial)

<table>
<thead>
<tr>
<th>Category/Type</th>
<th>Amount of Each Disbursement this Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>04</td>
<td>763.98</td>
</tr>
</tbody>
</table>

Transaction ID: SB17.4252

**Office Sought:**
- **House**
- **Senate**
- **President**

**Disbursement For:**
- **Primary**
- **General**

*Purpose of Disbursement*
- **Facebook Advertising**

**Candidate Name**
Robin Chew for Congress 2014

**Mailing Address**
1601 Willow Rd.

**City**
Menlo Park

**State**
CA

**Zip Code**
94025

**Transaction ID:** SB17.4247

**C. FreshBait**

Full Name (Last, First, Middle Initial)

<table>
<thead>
<tr>
<th>Category/Type</th>
<th>Amount of Each Disbursement this Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>06</td>
<td>421.79</td>
</tr>
</tbody>
</table>

**Office Sought:**
- **House**
- **Senate**
- **President**

**Disbursement For:**
- **Primary**
- **General**

*Purpose of Disbursement*
- **Campaign Printed Materials**

**Candidate Name**
Robin Chew for Congress 2014

**Mailing Address**
666 O'Farrell Street

**City**
San Francisco

**State**
CA

**Zip Code**
94109

**Transaction ID:** SB17.4247

**State:** CA

**District:** 14

**Date of Disbursement**
- **M M / D D / Y Y Y Y**: 04 / 30 / 2014

**Office Sought:**
- **House**
- **Senate**
- **President**

**Disbursement For:**
- **Primary**
- **General**

*Purpose of Disbursement*
- **Campaign Printed Materials**

**Candidate Name**
Robin Chew for Congress 2014

**Mailing Address**

**City**

**State**

**Zip Code**

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

**TOTAL This Period (last page this line number only)**
**NAME OF COMMITTEE (In Full)**
Robin Chew for Congress 2014

**LOAN SOURCE**
Mr. Robin Leo Chew

**Mailing Address**
904 Fallen Leaf Way

**City**
Emerald Hills

**State**
CA

**ZIP Code**
94062-3433

**Original Amount of Loan**
1500.00

**Cumulative Payment To Date**
0.00

**Balance Outstanding at Close of This Period**
1500.00

**Date Incurred**
07/16/2013

**Date Due**
06/3/2014

**Interest Rate**
0.00%

**Secured:**
No

**Election:**
Primary 2014

**TERMS**

<table>
<thead>
<tr>
<th>TERMS</th>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>06/3/2014</td>
<td>0.00%</td>
</tr>
</tbody>
</table>

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

1. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code

2. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code

3. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code

4. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code

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

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

**Transaction ID:** SC/10.4102

---

**Original Amount of Loan**

- **1500.00**

---

**Amount Guaranteed Outstanding:**

---

**Image# 14960908013**

---

**Transaction ID:** SC/10.4102

---

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**
NAME OF COMMITTEE (In Full)
Robin Chew for Congress 2014

<table>
<thead>
<tr>
<th>LOAN SOURCE</th>
<th>Full Name (Last, First, Middle Initial)</th>
<th>[PERSONAL FUNDS]</th>
<th>Election:</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. Robin Leo Chew</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td>904 Fallen Leaf Way</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emerald Hills</td>
<td>CA</td>
<td>94062-3433</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>750.00</td>
<td>0.00</td>
<td>750.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TERMS</th>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>D</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>08/22/2013</td>
<td>6/4/2014</td>
<td>0.00%</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

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

2. Full Name (Last, First, Middle Initial) | Name of Employer
Mailing Address | Occupation
City | State | ZIP Code

3. Full Name (Last, First, Middle Initial) | Name of Employer
Mailing Address | Occupation
City | State | ZIP Code

4. Full Name (Last, First, Middle Initial) | Name of Employer
Mailing Address | Occupation
City | State | ZIP Code

SUBTOTALS This Period This Page (optional) ................................................................. 750.00

TOTALS This Period (last page in this line only) ................................................................. 750.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
### Schedule C (FEC Form 3)
#### Loans

**Name of Committee (In Full)**
Robin Chew for Congress 2014

**Loan Source**
Mr. Robin Leo Chew

**Mailing Address**
904 Fallen Leaf WAY

**City**
Emerald Hills

**State**
CA

**ZIP Code**
94062-3433

<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>750.00</td>
<td>0.00</td>
<td>750.00</td>
</tr>
</tbody>
</table>

**Terms**
- **Date Incurred:** 09/30/2013
- **Date Due:** 6/4/2014
- **Interest Rate:** 0.00%

**Election:**
- Primary

**Amount Guaranteed Outstanding:**

**List All endorsers or guarantors (if any) to Loan Source**

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Mr. Robin Leo Chew</td>
<td>Mailing Address</td>
<td>Occupation</td>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Mr. Robin Leo Chew</td>
<td>Mailing Address</td>
<td>Occupation</td>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Mr. Robin Leo Chew</td>
<td>Mailing Address</td>
<td>Occupation</td>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Mr. Robin Leo Chew</td>
<td>Mailing Address</td>
<td>Occupation</td>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
</tbody>
</table>

**Subtotals**

- This Period This Page (optional)
- Subtotals: 750.00

**Totals**

- This Period (last page in this line only)
- Totals: 750.00

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

**Name of Committee (In Full)**
Robin Chew for Congress 2014

**Loan Source**
Full Name (Last, First, Middle Initial)
Mr. Robin Leo Chew

**Mailing Address**
904 Fallen Leaf Way

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emerald Hills</td>
<td>CA</td>
<td>94062-3433</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**
250.00

**Cumulative Payment To Date**
0.00

**Balance Outstanding at Close of This Period**
250.00

**Terms**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>09 / 17 / 2013</td>
<td>6/4/2014</td>
<td>0.00% (apr)</td>
</tr>
</tbody>
</table>

**Secured:**
No

**List All Endorsers or Guarantors (If any) to Loan Source**

1. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

2. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

3. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

4. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

**Subtotals**
This Period This Page (optional) ................................................................  250.00

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

**NAME OF COMMITTEE (In Full)**  
Robin Chew for Congress 2014

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Mr. Robin Leo Chew

**Mailing Address**  
904 Fallen Leaf Way

**City**  
Emerald Hills

**State**  
CA

**ZIP Code**  
94062-3433

**Original Amount of Loan**  
250.00

**Cumulative Payment To Date**  
0.00

**Balance Outstanding at Close of This Period**  
250.00

**TERMS**

**Date Incurred**  
10/15/2013

**Date Due**  
6/4/2014

**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
   
   City
   
   State
   
   ZIP Code

2. **Full Name (Last, First, Middle Initial)**
   
   Name of Employer
   
   Mailing Address
   
   City
   
   State
   
   ZIP Code

3. **Full Name (Last, First, Middle Initial)**
   
   Name of Employer
   
   Mailing Address
   
   City
   
   State
   
   ZIP Code

4. **Full Name (Last, First, Middle Initial)**
   
   Name of Employer
   
   Mailing Address
   
   City
   
   State
   
   ZIP Code

**SUBTOTALS** This Period This Page (optional) .......................................................  
250.00

**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.
### NAME OF COMMITTEE (In Full)
Robin Chew for Congress 2014

#### LOAN SOURCE
Mr. Robin Leo Chew

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>[PERSONAL FUNDS]</th>
<th>Election:</th>
<th>Primary</th>
<th>General</th>
<th>Other (specify)</th>
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<tbody>
<tr>
<td>Mr. Robin Leo Chew</td>
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<table>
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<th>[PERSONAL FUNDS]</th>
<th>Election:</th>
<th>Primary</th>
<th>General</th>
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<tbody>
<tr>
<td>Mr. Robin Leo Chew</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

#### Mailing Address
904 Fallen Leaf Way

<table>
<thead>
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<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emerald Hills</td>
<td>CA</td>
<td>94062-3433</td>
</tr>
</tbody>
</table>

#### Original Amount of Loan
- 500.00

#### Terms
- Date Incurred: 10/15/2013
- Date Due: 6/4/2014
- Interest Rate: 0.00%
- Secured: No

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

1. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

2. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

3. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

4. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

#### SUBTOTALS This Period This Page (optional)
- 500.00

#### TOTALS This Period (last page in this line only)
- 500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
## SCHEDULE C (FEC Form 3) LOANS

**NAME OF COMMITTEE (In Full)**
Robin Chew for Congress 2014

**LOAN SOURCE**
- Full Name (Last, First, Middle Initial): Mr. Robin Leo Chew
- [PERSONAL FUNDS]

**Mailing Address**
904 Fallen Leaf Way

**City**
Emerald Hills

**State**
CA

**ZIP Code**
94062-3433

**Original Amount of Loan**
1500.00

**Cumulative Payment To Date**
0.00

**Balance Outstanding at Close of This Period**
1500.00

**TERMS**
- **Date Incurred**: 11/05/2013
- **Date Due**: 6/4/2014
- **Interest Rate**: 0.00 % (apr)

**Election**
- Primary

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

1. **Full Name (Last, First, Middle Initial)**: Mr. Robin Leo Chew
   - **Name of Employer**
   - **Mailing Address**
     - 904 Fallen Leaf Way, Emerald Hills, CA 94062-3433
   - **City**
   - **State**
   - **ZIP Code**

2. **Full Name (Last, First, Middle Initial)**: Mr. Robin Leo Chew
   - **Name of Employer**
   - **Mailing Address**
     - 904 Fallen Leaf Way, Emerald Hills, CA 94062-3433
   - **City**
   - **State**
   - **ZIP Code**

3. **Full Name (Last, First, Middle Initial)**: Mr. Robin Leo Chew
   - **Name of Employer**
   - **Mailing Address**
     - 904 Fallen Leaf Way, Emerald Hills, CA 94062-3433
   - **City**
   - **State**
   - **ZIP Code**

4. **Full Name (Last, First, Middle Initial)**: Mr. Robin Leo Chew
   - **Name of Employer**
   - **Mailing Address**
     - 904 Fallen Leaf Way, Emerald Hills, CA 94062-3433
   - **City**
   - **State**
   - **ZIP Code**

**SUBTOTALS**
- This Period This Page (optional): 1500.00

**TOTALS**
- This Period (last page in this line only): 1500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**
Robin Chew for Congress 2014

**LOAN SOURCE**
Mr. Robin Leo Chew

**Mailing Address**
904 Fallen Leaf Way

**City**
Emerald Hills

**State**
CA

**ZIP Code**
94062-3433

**Original Amount of Loan**
750.00

**Cumulative Payment To Date**
0.00

**Balance Outstanding at Close of This Period**
750.00

**Date Incurred**
11 / 18 / 2013

**Date Due**
6 / 4 / 2014

**Secured:**
No

**TERMS**

<table>
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<tr>
<th>TERMS</th>
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<th>Date Due</th>
<th>Interest Rate</th>
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<tr>
<td>Secured:</td>
<td>11 / 18 / 2013</td>
<td>6 / 4 / 2014</td>
<td>0.00% (apr)</td>
</tr>
</tbody>
</table>

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

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

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

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

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

**SUBTOTALS**
This Period This Page (optional) ................................................................. 750.00

**TOTALS**
This Period (last page in this line only) ............................................................. 750.00

*Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.*
**NAME OF COMMITTEE (In Full)**
Robin Chew for Congress 2014

**LOAN SOURCE**
Full Name (Last, First, Middle Initial)
Mr. Robin Leo Chew

**Mailing Address**
904 Fallen Leaf Way

- **City**: Emerald Hills
- **State**: CA
- **ZIP Code**: 94062-3433

**Original Amount of Loan**: 500.00
**Cumulative Payment To Date**: 0.00
**Balance Outstanding at Close of This Period**: 500.00

**TERMS**

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<tr>
<th>Date Incurred</th>
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<td>12/10/2013</td>
<td>6/4/2014</td>
<td>0.00% (apr)</td>
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**Secured**: No

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

1. 
   - **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**: 
   - **State**: 
   - **ZIP Code**: 

2. 
   - **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**: 
   - **State**: 
   - **ZIP Code**: 

3. 
   - **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**: 
   - **State**: 
   - **ZIP Code**: 

4. 
   - **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**: 
   - **State**: 
   - **ZIP Code**: 

**SUBTOTALS**
This Period This Page (optional) .......................... 500.00

**TOTALS**
This Period (last page in this line only) ..................
**NAME OF COMMITTEE (In Full)**
Robin Chew for Congress 2014

**LOAN SOURCE**
Full Name (Last, First, Middle Initial)
Mr. Robin Leo Chew

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
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<tbody>
<tr>
<td>904 Fallen Leaf Way</td>
<td>Emerald Hills</td>
<td>CA</td>
<td>94062-3433</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**
1000.00

**Cumulative Payment To Date**
0.00

**Balance Outstanding at Close of This Period**
1000.00

**TERMS**
Date Incurred: 12/19/2013
Date Due: 6/4/2014
Interest Rate: 0.00 % (apr)
Secured: Yes

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

<table>
<thead>
<tr>
<th>1. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. Robin Leo Chew</td>
<td></td>
<td></td>
<td>Emerald Hills</td>
<td>CA</td>
<td>94062-3433</td>
</tr>
</tbody>
</table>

**Subtotals**
This Period This Page (optional)................................................................. 1000.00

**Totals**
This Period (last page in this line only).......................................................
**NAME OF COMMITTEE** (In Full)  
Robin Chew for Congress 2014

**LOAN SOURCE**  
Mr. Robin Leo Chew

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emerald Hills</td>
<td>CA</td>
<td>94062-3433</td>
</tr>
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<thead>
<tr>
<th>ORIGINAL AMOUNT OF LOAN</th>
<th>CUMULATIVE PAYMENT TO DATE</th>
<th>BALANCE OUTSTANDING AT CLOSE OF THIS PERIOD</th>
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<tbody>
<tr>
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<td>1000.00</td>
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**TERMS**

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<th>INTEREST RATE</th>
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<td>6/4/2014</td>
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<td>0.00% (apr)</td>
<td>No</td>
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</table>

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

1. Full Name (Last, First, Middle Initial)  
   Name of Employer  
   Mailing Address  
   City  
   State  
   ZIP Code

2. Full Name (Last, First, Middle Initial)  
   Name of Employer  
   Mailing Address  
   City  
   State  
   ZIP Code

3. Full Name (Last, First, Middle Initial)  
   Name of Employer  
   Mailing Address  
   City  
   State  
   ZIP Code

4. Full Name (Last, First, Middle Initial)  
   Name of Employer  
   Mailing Address  
   City  
   State  
   ZIP Code

**SUBTOTALS**  
This Period This Page (optional) ......................................................... 1000.00

**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.*
<table>
<thead>
<tr>
<th>Loan Source</th>
<th>Full Name (Last, First, Middle Initial)</th>
<th>[PERSONAL FUNDS]</th>
<th>Election</th>
<th>Secured:</th>
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<tbody>
<tr>
<td>Mr. Robin Leo Chew</td>
<td></td>
<td>2014</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

**Mailing Address**
904 Fallen Leaf Way

**City** Emerald Hills  
**State** CA  
**ZIP Code** 94062-3433

**Original Amount of Loan** 750.00

**Cumulative Payment To Date** 0.00

**Balance Outstanding at Close of This Period** 750.00

**Terms**
- **Date Incurred:** 6/4/2014  
- **Date Due:**  
- **Interest Rate:** 0.00% (apr)  
- **Secured:** No

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

1. **Full Name (Last, First, Middle Initial):** Mr. Robin Leo Chew  
**Mailing Address:** 904 Fallen Leaf Way  
**City:** Emerald Hills  
**State:** CA  
**ZIP Code:** 94062-3433

2. **Full Name (Last, First, Middle Initial):** Mr. Robin Leo Chew  
**Mailing Address:** 904 Fallen Leaf Way  
**City:** Emerald Hills  
**State:** CA  
**ZIP Code:** 94062-3433

3. **Full Name (Last, First, Middle Initial):** Mr. Robin Leo Chew  
**Mailing Address:** 904 Fallen Leaf Way  
**City:** Emerald Hills  
**State:** CA  
**ZIP Code:** 94062-3433

4. **Full Name (Last, First, Middle Initial):** Mr. Robin Leo Chew  
**Mailing Address:** 904 Fallen Leaf Way  
**City:** Emerald Hills  
**State:** CA  
**ZIP Code:** 94062-3433

**Subtotals** This Period This Page (optional) ................................................................. + 750.00

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

**NAME OF COMMITTEE (In Full)**
Robin Chew for Congress 2014

**LOAN SOURCE**
Mr. Robin Leo Chew

**Mailing Address**
904 Fallen Leaf Way

---

**City** Emerald Hills  
**State** CA  
**ZIP Code** 94062-3433

**Original Amount of Loan** 250.00  
**Cumulative Payment To Date** 0.00  
**Balance Outstanding at Close of This Period** 250.00

**TERMS**
- **Date Incurred**: 03 / 26 / 2014  
- **Date Due**: 06 / 4 / 2014  
- **Interest Rate**: 0.00 % (apr)  
- **Secured**: No

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

<table>
<thead>
<tr>
<th></th>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Occupation</th>
<th>Amount Guaranteed Outstanding</th>
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</thead>
<tbody>
<tr>
<td>1</td>
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**SUBTOTALS This Period This Page (optional)**

**TOTALS This Period (last page in this line only)**

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*Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.*
**SCHEDULE C**  (FEC Form 3)

**LOANS**

**NAME OF COMMITTEE (In Full)**  
Robin Chew for Congress 2014

<table>
<thead>
<tr>
<th>LOAN SOURCE</th>
<th>Full Name (Last, First, Middle Initial)</th>
<th>[PERSONAL FUNDS]</th>
<th>Election: 2014</th>
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</thead>
<tbody>
<tr>
<td>Mr. Robin Leo Chew</td>
<td></td>
<td>[PERSONAL FUNDS]</td>
<td>Primary 2014</td>
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<tr>
<td>Mailing Address</td>
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<td>General</td>
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<td></td>
<td>Other (specify)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emerald Hills</td>
<td>CA</td>
<td>94062-3433</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
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<th>Balance Outstanding at Close of This Period</th>
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**TERMS**

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<th>Date Due</th>
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<tr>
<td>6/3/2014</td>
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<td>No</td>
</tr>
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</table>

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

1. Full Name (Last, First, Middle Initial)  
Name of Employer

Mailing Address  
City  
State  
ZIP Code

2. Full Name (Last, First, Middle Initial)  
Name of Employer

Mailing Address  
City  
State  
ZIP Code

3. Full Name (Last, First, Middle Initial)  
Name of Employer

Mailing Address  
City  
State  
ZIP Code

4. Full Name (Last, First, Middle Initial)  
Name of Employer

Mailing Address  
City  
State  
ZIP Code

**SUBTOTALS**  This Period This Page (optional) .................................................. 900.96

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

**NAME OF COMMITTEE** (In Full)
Robin Chew for Congress 2014

---

**LOAN SOURCE**
Mr. Robin Leo Chew

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>[PERSONAL FUNDS]</th>
</tr>
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<tbody>
<tr>
<td>Mailing Address</td>
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<tr>
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</tbody>
</table>

**Mailing Address**
904 Fallen Leaf Way

**City**
Emerald Hills

**State**
CA

**ZIP Code**
94062-3433

---

**Original Amount of Loan**
250.00

**Cumulative Payment To Date**
0.00

**Balance Outstanding at Close of This Period**
250.00

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**TERMS**

<table>
<thead>
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<td>M / D / Y</td>
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<td>6/3/2014</td>
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<td>0.00</td>
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**Secured:**
Yes  No

---

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

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

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

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

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

---

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

**TOTALS**
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Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
### SCHEDULE C (FEC Form 3)

#### LOANS

**NAME OF COMMITTEE (In Full)**
Robin Chew for Congress 2014

**LOAN SOURCE**
Mr. Robin Leo Chew

**Mailing Address**
904 Fallen Leaf Way

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emerald Hills</td>
<td>CA</td>
<td>94062-3433</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**
250.00

**Cumulative Payment To Date**
0.00

**Balance Outstanding at Close of This Period**
250.00

**TERMS**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/5/2014</td>
<td>6/3/2014</td>
<td>0.00% (apr)</td>
<td>No</td>
</tr>
</tbody>
</table>

**Election:**
- Primary
- General
- Other (specify)

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

<table>
<thead>
<tr>
<th>1. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
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<td></td>
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<table>
<thead>
<tr>
<th>2. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
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<td></td>
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<td>State</td>
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<td></td>
<td></td>
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<table>
<thead>
<tr>
<th>3. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
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<td></td>
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</tr>
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<td>CA</td>
<td>94062-3433</td>
</tr>
</tbody>
</table>

**SUBTOTALS**
This Period This Page (optional)

<table>
<thead>
<tr>
<th></th>
<th>250.00</th>
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</thead>
</table>

**TOTALS**
This Period (last page in this line only)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
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</table>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
## SCHEDULE C (FEC Form 3)
### LOANS

**NAME OF COMMITTEE (In Full)**
Robin Chew for Congress 2014

**LOAN SOURCE**
Full Name (Last, First, Middle Initial)
Mr. Robin Leo Chew

<table>
<thead>
<tr>
<th>Mailing Address</th>
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<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>904 Fallen Leaf Way</td>
<td>Emerald Hills</td>
<td>CA</td>
<td>94062-3433</td>
</tr>
</tbody>
</table>

**[PERSONAL FUNDS]**

<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>792.98</td>
<td>0.00</td>
<td>792.98</td>
</tr>
</tbody>
</table>

**TERMS**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>05/14/2014</td>
<td>6/3/2014</td>
<td>0.00% (apr)</td>
<td>No</td>
</tr>
</tbody>
</table>

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

1. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

2. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

3. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

4. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City
   - State
   - ZIP Code

**SUBTOTALS**
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**TOTALS**
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