

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

KUCHAR FOR CONGRESS

ADDRESS (number and street) ▼

4107 ABELIA CT

Check if different than previously reported. (ACC)

ARLINGTON

TX

76017

2. **FEC IDENTIFICATION NUMBER** ▼

C C00545699

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

TX

06

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 / / in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 FRANK CHARLES KUCHAR

Signature of Treasurer FRANK CHARLES KUCHAR

[Electronically Filed]

Date

/ /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
KUCCHAR FOR CONGRESS

Report Covering the Period: From: 10 / 01 / 2013 To: 12 / 31 / 2013

	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))....	4407.99	12828.57
(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)).....	4407.99	12828.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5629.79	9181.33
(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)).....	5629.79	9181.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3832.08	
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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

KUCCHAR FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2013 To: M M / D D / Y Y Y Y 12 / 31 / 2013

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).....	1855.00	8805.00
(ii) Unitemized.....	2552.99	4023.57
(iii) TOTAL of contributions from individuals ▶	4407.99	12828.57
(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)(iii), (b), (c), and (d))..	4407.99	12828.57
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	115.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	4407.99	12943.57

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5629.79	9181.33
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	-14.95	-14.95
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	5614.84	9166.38

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5038.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4407.99
25. SUBTOTAL (add Line 23 and Line 24).....	9446.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5614.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3832.08

**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	

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NAME OF COMMITTEE (In Full)
KUCCHAR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES ASHBY

Mailing Address 604 WEST HARWOOD RD.

City State Zip Code
EULESS TX 76039

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2013

Transaction ID : SA11AI.4289

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
KELLY CANON

Mailing Address 901 KRISTIN CT.

City State Zip Code
ARLINGTON TX 76012

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

Name of Employer Occupation
L-3 COMMUNICATIONS FACILITIES PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2013

Transaction ID : SA11AI.4288

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
WILLIAM CARSON

Mailing Address 651 MCADA DRIVE

City State Zip Code
MIDLOTHIAN TX 76065

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

Name of Employer Occupation
PCCR USA LABORER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 04 / 2013

Transaction ID : SA11AI.4224

Amount of Each Receipt this Period
100.00

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

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

400.00

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

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NAME OF COMMITTEE (In Full)
KUCCHAR FOR CONGRESS

Full Name (Last, First, Middle Initial) NONE CASH		Date of Receipt M M / D D / Y Y Y Y Y 10 / 12 / 2013
Mailing Address NONE		Transaction ID : SA11AI.4231
City WAXAHACHIE	State TX	
Zip Code 75165		Amount of Each Receipt this Period 12.00
FEC ID number of contributing federal political committee. C		Name of Employer NONE
Occupation NONE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 202.00
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) NONE CASH		Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2013
Mailing Address NONE		Transaction ID : SA11AI.4255
City WAXAHACHIE	State TX	
Zip Code 75165		Amount of Each Receipt this Period 105.00
FEC ID number of contributing federal political committee. C		Name of Employer NONE
Occupation NONE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 307.00
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) NONE CASH		Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2013
Mailing Address NONE		Transaction ID : SA11AI.4272
City WAXAHACHIE	State TX	
Zip Code 75165		Amount of Each Receipt this Period 163.00
FEC ID number of contributing federal political committee. C		Name of Employer NONE
Occupation NONE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 470.00
Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	280.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
KUCCHAR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JERRY COLE

Mailing Address 2323 LAKE ROBBINS DR.
APT. 801

City SPRING State TX Zip Code 77380

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11AI.4265

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BRUCE ERICKSON

Mailing Address 630 CAMELLIA DRIVE

City RED OAK State TX Zip Code 75154

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

Name of Employer ERICKSON CONSULTING & SALES LL Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2013

Transaction ID : SA11AI.4261

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. KENNETH L RAY

Mailing Address 143 MEADOW GLEN

City OVILLA State TX Zip Code 75154

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

Name of Employer USDA Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2013

Transaction ID : SA11AI.4240

Amount of Each Receipt this Period
125.00

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

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

925.00

**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 8 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	

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NAME OF COMMITTEE (In Full)
KUCCHAR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RAYMOND ROGOWICZ

Mailing Address **141 WATER STREET**

City **OVILLA** State **TX** Zip Code **75154**

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

Name of Employer **EXHIBIT TRADERS** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 05 / 2013

Transaction ID : SA11AI.4270

Amount of Each Receipt this Period
250.00

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).....

250.00

1855.00

**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 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)
KUCCHAR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CRABTREE DESIGNS		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 932 COUNTRY CREEK LANE		Amount of Each Disbursement this Period 203.96 Transaction ID : SB17.4320
City RED OAK State TX Zip Code 75154	Purpose of Disbursement CAMPAIGN MATERIALS 006 Category/Type	
Candidate Name KUCCHAR FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 06	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. SEAN FOUSHEE		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 4921 SADDLEBACK RD.		Amount of Each Disbursement this Period 70.00 Transaction ID : SB17.4308
City ARLINGTON State TX Zip Code 76017	Purpose of Disbursement WEBSITE EXPENSE 001 Category/Type	
Candidate Name KUCCHAR FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 06	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. JTD STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 201 MAIN STREET SUITE 600		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.4316
City FORT WORTH State TX Zip Code 76102	Purpose of Disbursement CONSULTING FEE 005 Category/Type	
Candidate Name KUCCHAR FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 06	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	573.96
TOTAL 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)
KUCCHAR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JTD STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 201 MAIN STREET SUITE 600		Amount of Each Disbursement this Period 585.13
City FORT WORTH State TX Zip Code 76102	Purpose of Disbursement FACEBOOK ADS 004	
Candidate Name KUCCHAR FOR CONGRESS		Transaction ID : SB17.4317
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 06	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. JTD STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 201 MAIN STREET SUITE 600		Amount of Each Disbursement this Period 20.00
City FORT WORTH State TX Zip Code 76102	Purpose of Disbursement GOOGLE APPS 004	
Candidate Name KUCCHAR FOR CONGRESS		Transaction ID : SB17.4318
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 06	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. JTD STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 201 MAIN STREET SUITE 600		Amount of Each Disbursement this Period 575.08
City FORT WORTH State TX Zip Code 76102	Purpose of Disbursement VOTE MAPPING 005	
Candidate Name KUCCHAR FOR CONGRESS		Transaction ID : SB17.4319
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 06	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1180.21
TOTAL 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)
KUCCHAR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. REPUBLICAN PARTY OF TEXAS		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 1108 LAVACA, SUITE 500		Amount of Each Disbursement this Period 3125.00 Transaction ID : SB17.4312
City AUSTIN State TX Zip Code 78701	Purpose of Disbursement REGISTER ON THE BALLOT 001 Category/Type	
Candidate Name FRANK CHARLES KUCCHAR	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: 06		

Full Name (Last, First, Middle Initial) B. U.S. POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address OVILLA ROAD		Amount of Each Disbursement this Period 65.95 Transaction ID : SB17.4311
City RED OAK State TX Zip Code 75154	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name KUCCHAR FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	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:		

SUBTOTAL of Disbursements This Page (optional).....	3190.95
TOTAL This Period (last page this line number only).....	4945.12

**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 12 OF 12	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KUCCHAR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. INTUIT		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 2632 MARINE WAY		Amount of Each Disbursement this Period -14.95 Transaction ID : SB21.4324
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement REFUND OF FEES 001 Category/Type	
Candidate Name KUCCHAR FOR CONGRESS		
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: 06		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	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:		

SUBTOTAL of Disbursements This Page (optional).....	-14.95
TOTAL This Period (last page this line number only).....	-14.95