

**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

Angelica Duenas For Us

ADDRESS (number and street)

PO Box 7200

Check if different
than previously
reported. (ACC)

Van Nuys

CA

91406

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00697391

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

CA

29

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

in the
State of(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

01

D D / Y Y Y Y

01

Y Y Y Y

2026

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2026

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 Duenas, Angelica, , ,

Signature of Treasurer

Duenas, Angelica, , ,

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

15

Y Y Y Y

2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Angelica Duenas For Us

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

	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))	13262.53	148501.21
(b) Total Contribution Refunds (from Line 20(d))	0.00	1400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	13262.53	147101.21
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2053.34	120476.72
(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))	2053.34	120476.72
8. Cash on Hand at Close of Reporting Period (from Line 27)	11112.92	
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Angelica Duenas For Us

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026**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).....

7829.00

65588.29

(ii) Unitemized

5433.53

80714.92

(iii) TOTAL of contributions
from individuals ▶

13262.53

146303.21

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

2198.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

13262.53

148501.21

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

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

13262.53

148501.21

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2053.34	120476.72
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	2000.00
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	1400.00
(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	1400.00
21. OTHER DISBURSEMENTS	0.00	2300.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2053.34	126176.72

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	- 96.27
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13262.53
25. SUBTOTAL (add Line 23 and Line 24).....	13166.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2053.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	11112.92

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 13

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Angelica Duenas For Us

Full Name (Last, First, Middle Initial)

Alcala, Zach, , ,

A. Mailing Address 8830 Helen Ave

City

SUN VALLEY

State

CA

Zip Code

91352-3224

FEC ID number of contributing
federal political committee.

C

Name of Employer
All Things and More

Occupation
Resale

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 18 2026

Transaction ID : SA11AI.15824

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Alvarez, Roberto, , ,

B. Mailing Address 13926 Close St

City

Whittier

State

CA

Zip Code

90605

FEC ID number of contributing
federal political committee.

C

Name of Employer
KP

Occupation
RT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 21 2026

Transaction ID : SA11AI.16069

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

barakat, abdul, , ,

C. Mailing Address 7440 N Sepulveda Blvd

City

Van Nuys

State

CA

Zip Code

91405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 02 2026

Transaction ID : SA11AI.15828

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

629.00

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 13

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Angelica Duenas For Us

Full Name (Last, First, Middle Initial)

Dakin, Linnea, , ,

A. Mailing Address 15425 Sherman Way Unit 209

City

Van Nuys

State

CA

Zip Code

91406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 04 2026

Transaction ID : SA11AI.15834

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dakin, Linnea, , ,

B. Mailing Address 15425 Sherman Way Unit 209

City

Van Nuys

State

CA

Zip Code

91406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 24 2026

Transaction ID : SA11AI.16361

Amount of Each Receipt this Period

1950.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Shah, Saleem, , ,

C. Mailing Address 9236 Sophia Ave

City

North Hills

State

CA

Zip Code

91343

FEC ID number of contributing
federal political committee.

C

Name of Employer

Product

Occupation

Product Consultant

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1183.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 17 2026

Transaction ID : SA11AI.15823

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

3475.00

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 7 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Angelica Duenas For Us

Full Name (Last, First, Middle Initial)

Shah, Saleem, , ,

A.

Mailing Address 9236 Sophia Ave

City

North Hills

State

CA

Zip Code

91343

FEC ID number of contributing
federal political committee.

C

Name of Employer
Product

Occupation
Product Consultant

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1283.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 24 2026

Transaction ID : SA11AI.15827

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Shah, Saleem, , ,

B.

Mailing Address 9236 Sophia Ave

City

North Hills

State

CA

Zip Code

91343

FEC ID number of contributing
federal political committee.

C

Name of Employer
Product

Occupation
Product Consultant

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1308.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 17 2026

Transaction ID : SA11AI.15856

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Valenzuela, Vanessa, , ,

C.

Mailing Address 306N West El Norte Pkwy #7

City

Escondido

State

CA

Zip Code

92026

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Controller

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 20 2026

Transaction ID : SA11AI.16054

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

225.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 13

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Angelica Duenas For Us

Full Name (Last, First, Middle Initial)

Wilhem, Christopher, , ,

A. Mailing Address 15425 Sherman Way, Unit 209

City
Van NuysState
CAZip Code
91406FEC ID number of contributing
federal political committee.

C

Name of Employer
Armanino Advisory, LLCOccupation
Manager

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		24		2026

Transaction ID : SA11AI.16362

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 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

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 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

☐ Memo Item

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

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

3500.00

7829.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 13

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Angelica Duenas For Us

Full Name (Last, First, Middle Initial)

A. Act Blue

Mailing Address 366 Summer Street

Date of Disbursement

M M	D D	Y Y Y Y
03	31	2026

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C

Purpose of Disbursement
Processing Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

306.71

Transaction ID : SB17.16369

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Amazon

Mailing Address 410 Terry Ave N

Date of Disbursement

M M	D D	Y Y Y Y
03	31	2026

City
SeattleState
WAZip Code
98109

FEC Identification Number

C

Purpose of Disbursement
Folding Table

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

51.30

Transaction ID : SB17.16368

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Duenas, Angelica, , ,

Mailing Address

Date of Disbursement

M M	D D	Y Y Y Y
03	30	2026

City

State

Zip Code

FEC Identification Number

C C00697391

Purpose of Disbursement
Reimbursement - Ballot Fee

Candidate Name

Angelica Duenas For Us

Category/
Type

Amount of Each Disbursement this Period

1695.33

Transaction ID : SB17.16367

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 29

SUBTOTAL of Disbursements This Page (optional).....▶

2053.34

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

2053.34

SCHEDULE C (FEC Form 3)
LOANS

PAGE 10 OF 13

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5730

Angelica Duenas For Us

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Angelica Duenas For Us

Mailing Address

PO Box 7200

City

Van Nuys

State

CA

ZIP Code

91406

☒ Personal Funds of the Candidate

Original Amount of Loan

2100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2100.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 01 / 2021

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2100.00

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

PAGE 11 OF 13

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5732

Angelica Duenas For Us

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

Duenas, Angelica, , ,

Mailing Address

7421 Cartwright Ave

City

Sun Valley

State

CA

ZIP Code

91352

☒ Personal Funds of the Candidate

Original Amount of Loan

- 1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

- 1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
10 11 / 2021

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

- 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.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 12 OF 13

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.10245

Angelica Duenas For Us

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

☐ Primary☒ General☐ Other (specify) ▼

Duenas, Angelica, , ,

Mailing Address

7421 Cartwright Ave

City

Sun Valley

State

CA

ZIP Code

91352

☒ Personal Funds of the Candidate

Original Amount of Loan

- 1100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

- 1100.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 / 23 / 2022

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

- 1100.00

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

0.00

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 OF 13

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Angelica Duenas For Us

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Angelica Duenas For Us

Nature of Debt (Purpose):

Error Entry Correction

Mailing Address PO Box 7200

City

Van Nuys

State

CA

Zip Code

91406

Outstanding Balance Beginning This Period

- 2100.00

Transaction ID : SD10.8112

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

- 2100.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Duenas, Angelica, , ,

Nature of Debt (Purpose):

previous loan debt

Mailing Address 7421 Cartwright Ave

City

Sun Valley

State

CA

Zip Code

91352

Outstanding Balance Beginning This Period

2100.00

Transaction ID : SD10.5728

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

0.00

2) **TOTALS** This Period (last page this line number only) ▶

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶