

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
McDonald for Congress

ADDRESS (number and street) 4450 California Place, PMB 331
 Check if different than previously reported. (ACC)
Long Beach CA 90807

2. **FEC IDENTIFICATION NUMBER** C00435412
CITY **STATE** **ZIP CODE**
STATE **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CA 37

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 10 01 2007 through 12 31 2007

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 Steven Mele

Signature of Treasurer Electronically Filed by Steven Mele Date 01 30 2008

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

McDonald for Congress

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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)).....	1000.00	52547.21
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1000.00	51747.21
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	1194.95	49741.73
(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)).....	1194.95	49741.73
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2005.48	
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).....	35107.08	

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
McDonald for Congress

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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).....

1000.00

24380.00

(ii) Unitemized.....

0.00

3759.00

(iii) TOTAL of contributions

1000.00

28139.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

0.00

21350.00

(d) The Candidate.....

0.00

3058.21

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

1000.00

52547.21

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)..... ▶

1000.00

52547.21

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1194.95	49741.73
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	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	600.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	800.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	1194.95	50541.73

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2200.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	1000.00
25. SUBTOTAL (add Line 23 and Line 24).....	3200.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1194.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2005.48

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 5 / 8	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full) McDonald for Congress
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A.

Full Name (Last, First, Middle Initial) Charles Cho		Date of Receipt	
Mailing Address 1823 Carson St.		M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7	
City	State	Zip Code	Transaction ID: INC.A.184
Carson	CA	90745	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		1000.00	
Name of Employer Village Liquors	Occupation Business Owner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

**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)

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

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NAME OF COMMITTEE (In Full)
McDonald for Congress

A.	Full Name (Last, First, Middle Initial) Gold Image Printing Mailing Address 5784 Venice Blvd. City Los Angeles State CA Zip Code 90019 Purpose of Disbursement Flyers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.186 Date of Disbursement 12 / 14 / 2007 Amount of Each Disbursement this Period 757.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) ML Associates, LLC Mailing Address 8581 Santa Monica Blvd., #504 City West Hollywood State CA Zip Code 90069 Purpose of Disbursement Accounting services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.189 Date of Disbursement 10 / 30 / 2007 Amount of Each Disbursement this Period 255.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) ML Associates, LLC Mailing Address 8581 Santa Monica Blvd., #504 City West Hollywood State CA Zip Code 90069 Purpose of Disbursement Accounting services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.188 Date of Disbursement 11 / 30 / 2007 Amount of Each Disbursement this Period 136.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1149.42
TOTAL This Period (last page this line number only) ▶	1149.42

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
McDonald for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Steven Belhumeur	Nature of Debt (Purpose): Campaign manager and field director
Mailing Address 20929 Ventura Blvd., Ste 47101	
City State ZIP Code Woodland Hills CA 91364	

Outstanding Balance Beginning This Period 13402.35	Transaction ID: PAY:D:58	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 13402.35

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Steven Belhumeur	Nature of Debt (Purpose): Voter file and software
Mailing Address 20929 Ventura Blvd., Ste 47101	
City State ZIP Code Woodland Hills CA 91364	

Outstanding Balance Beginning This Period 8261.23	Transaction ID: PAY:D:59	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8261.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Steven Belhumeur	Nature of Debt (Purpose): Campaign manager
Mailing Address 20929 Ventura Blvd., Ste 47101	
City State ZIP Code Woodland Hills CA 91364	

Outstanding Balance Beginning This Period 3448.25	Transaction ID: PAY:D:61	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3448.25

1) SUBTOTALS This Period This Page (optional).....	▶	25111.83
2) TOTALS This Period (last page this line number only).....	▶	
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)	▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 8 / 8
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
McDonald for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Steven Belhumeur	Nature of Debt (Purpose): Lawn signs, Robo calls
Mailing Address 20929 Ventura Blvd., Ste 47101	
City State ZIP Code Woodland Hills CA 91364	

Outstanding Balance Beginning This Period <input type="text" value="1854.00"/>	Transaction ID: PAY:D:62	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1854.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Steven Belhumeur	Nature of Debt (Purpose): Campaign Manager and Field Director
Mailing Address 20929 Ventura Blvd., Ste 47101	
City State ZIP Code Woodland Hills CA 91364	

Outstanding Balance Beginning This Period <input type="text" value="8000.00"/>	Transaction ID: PAY:D:133	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="8000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ML Associates, LLC	Nature of Debt (Purpose): Accounting services
Mailing Address 8581 Santa Monica Blvd., #504	
City State ZIP Code West Hollywood CA 90069	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: PAY:D:193	
Amount Incurred This Period <input type="text" value="141.25"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="141.25"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="9995.25"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="35107.08"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="35107.08"/>