

# 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

Bob Flores for Congress

ADDRESS (number and street)

728 W. Edna Place

Check if different than previously reported. (ACC)

Covina

CA

91722

2. FEC IDENTIFICATION NUMBER ▼

C C00518613

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

43

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

11 / 27 / 2012

through

M M /

D D /

Y Y Y Y

12 / 31 / 2012

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 Yolanda Miranda

Signature of Treasurer Yolanda Miranda

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

01 / 29 / 2013

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

Write or Type Committee Name  
**Bob Flores for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	0.00	4204.00
(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)) .....	0.00	4204.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	1000.00	3220.20
(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)) .....	1000.00	3220.20
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	983.40	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	11354.08	

**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

**Bob Flores for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	3300.00
(ii) Unitemized.....	0.00	904.00
(iii) TOTAL of contributions from individuals ▶	0.00	4204.00
(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))..	0.00	4204.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	0.00	4204.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1000.00	3220.20
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 .....	0.00	0.40
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	1000.00	3220.60

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1983.40
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	1983.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1000.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	983.40

**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 5 OF 9	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Bob Flores for Congress**

Full Name (Last, First, Middle Initial) <b>A. Yolanda Miranda &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012	
Mailing Address 728 W. Edna Place			Amount of Each Disbursement this Period 1000.00	
City Covina	State CA	Zip Code 91722	Transaction ID : EXPB44	
Purpose of Disbursement Accounting and reporting services		001 Category/Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B.</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				
Candidate Name			Category/Type	
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) <b>C.</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				
Candidate Name			Category/Type	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 6 OF 9
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Bob Flores for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Bank of America</b>		Nature of Debt (Purpose): Credit card payment
Mailing Address P.O. Box 982235		
City	State	Zip Code
El Paso	TX	79998

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD42</b>	
<input type="text" value="90.05"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="90.05"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Robert Flores</b>		Nature of Debt (Purpose): Filing fee
Mailing Address 3924 W Avenue 42		
City	State	Zip Code
Los Angeles	CA	90065

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD7</b>	
<input type="text" value="1818.42"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1818.42"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Robert Flores</b>		Nature of Debt (Purpose): Office supplies
Mailing Address 3924 W Avenue 42		
City	State	Zip Code
Los Angeles	CA	90065

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD8</b>	
<input type="text" value="809.85"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="809.85"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="2718.32"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 7 OF 9
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Bob Flores for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Robert Flores</b>	Nature of Debt (Purpose): Printing letterhead and envelopes
Mailing Address 3924 W Avenue 42	
City State Zip Code Los Angeles CA 90065	

Outstanding Balance Beginning This Period 1891.16	<b>Transaction ID : PAYD9</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1891.16

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Robert Flores</b>	Nature of Debt (Purpose): Payment to L.A. County
Mailing Address 3924 W Avenue 42	
City State Zip Code Los Angeles CA 90065	

Outstanding Balance Beginning This Period 250.00	<b>Transaction ID : PAYD11</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Robert Flores</b>	Nature of Debt (Purpose): Credit card payments
Mailing Address 3924 W Avenue 42	
City State Zip Code Los Angeles CA 90065	

Outstanding Balance Beginning This Period 625.00	<b>Transaction ID : PAYD41</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 625.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	2766.16
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Bob Flores for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Doris Lau</b>	Nature of Debt (Purpose): Voter Register List
Mailing Address 417 N. Alhambra Ave., #B	
City State Zip Code Monterey CA 91755	

Outstanding Balance Beginning This Period 93.00	<b>Transaction ID : PAYD25</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 93.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Doris Lau</b>	Nature of Debt (Purpose): Postage
Mailing Address 417 N. Alhambra Ave., #B	
City State Zip Code Monterey CA 91755	

Outstanding Balance Beginning This Period 199.00	<b>Transaction ID : PAYD26</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 199.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Doris Lau</b>	Nature of Debt (Purpose): Copies
Mailing Address 417 N. Alhambra Ave., #B	
City State Zip Code Monterey CA 91755	

Outstanding Balance Beginning This Period 28.14	<b>Transaction ID : PAYD27</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 28.14

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	320.14
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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 9 OF 9
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Bob Flores for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Doris Lau</b>	Nature of Debt (Purpose): Postage
Mailing Address 417 N. Alhambra Ave., #B	
City State Zip Code Monterey CA 91755	

Outstanding Balance Beginning This Period 67.50	<b>Transaction ID : PAYD28</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 67.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Los Angeles County Registrar/ Recorder</b>	Nature of Debt (Purpose): Candidate Statement
Mailing Address 12400 Imperial Hwy.	
City State Zip Code Norwalk CA	

Outstanding Balance Beginning This Period 4981.96	<b>Transaction ID : PAYD10</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4981.96

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Yolanda Miranda &amp; Associates</b>	Nature of Debt (Purpose): Accounting and reporting services
Mailing Address 728 W. Edna Place	
City State Zip Code Covina CA 91722	

Outstanding Balance Beginning This Period 1500.00	<b>Transaction ID : PAYD43</b>	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 500.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	5549.46
2) <b>TOTALS</b> This Period (last page this line number only) .....	11354.08
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	11354.08