

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

Jack Orswell for Congress

ADDRESS (number and street) 888 S. Figueroa St., Suite 860

Check if different than previously reported. (ACC)

Los Angeles

CA

90017

2. **FEC IDENTIFICATION NUMBER**

C C00513838

CITY

STATE

ZIP CODE

STATE DISTRICT

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

CA

27

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 11 / 06 / 2012 in the State of CA

(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 / 2012 through 10 / 17 / 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 William R. Turner

Signature of Treasurer William R. Turner

[Electronically Filed]

Date

10 / 24 / 2012

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									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Jack Orswell 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))....	9958.00	134458.25
(b) Total Contribution Refunds (from Line 20(d))	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	9958.00	133458.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	21868.56	126382.18
(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)).....	21868.56	126382.18
8. Cash on Hand at Close of Reporting Period (from Line 27).....	32523.77	
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).....	20000.00	

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

Jack Orswell for Congress

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

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).....	6300.00	111536.92
(ii) Unitemized.....	3658.00	11916.00
(iii) TOTAL of contributions from individuals ▶	9958.00	123452.92
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	8500.00
(d) The Candidate.....	0.00	2505.33
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	9958.00	134458.25
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	20000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	20000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	5802.70
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	9958.00	160260.95

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	21868.56	126382.18
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	1000.00
(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	1000.00
21. OTHER DISBURSEMENTS	0.00	355.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	21868.56	127737.18

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	44434.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9958.00
25. SUBTOTAL (add Line 23 and Line 24).....	54392.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	21868.56
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	32523.77

**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 16
	<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	

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)
Jack Orswell for Congress

A. Full Name (Last, First, Middle Initial)
Steven W. Nichols

Mailing Address 3100 Linder St.

City Hemet State CA Zip Code 92545

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2012

Transaction ID : INCA577

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Charles W. Stephens

Mailing Address 1296 Adair Street

City San Marino State CA Zip Code 91108

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

Name of Employer N/A Occupation Retired

Receipt For: 2002
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2012

Transaction ID : INCA585

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Ann P. Park

Mailing Address 1706 Grace Ave.

City Arcadia State CA Zip Code 91006

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

Name of Employer Self Occupation Veterinarian

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA568

Amount of Each Receipt this Period
 100.00

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

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

1600.00

**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 16
	<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)
Jack Orswell for Congress

A. Full Name (Last, First, Middle Initial)
Kathy E. Calleton

Mailing Address 301 Churchill Road

City Sierra Madre State CA Zip Code 91024

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2012

Transaction ID : INCA627

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Joe Cavanaugh

Mailing Address 5334 Mountain Springs Ranch Rd.

City La Verne State CA Zip Code 91750

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

Name of Employer Burro Canyon Shooting Park Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2012

Transaction ID : INCA607

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Rudy J. Tekippe

Mailing Address 1301 Skyline Drive

City Decorah State IA Zip Code 52101

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

Name of Employer MWH Occupation Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2012

Transaction ID : INCA630

Amount of Each Receipt this Period
 200.00

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

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

1450.00

**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 16
	<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)
Jack Orswell for Congress

A. Full Name (Last, First, Middle Initial)
Charles E. Wert

Mailing Address 237 Via Ithaca

City State Zip Code
Newport Beach CA 92663

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

Name of Employer Occupation
Evercore Trust Company Banker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2012

Transaction ID : INCA606

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Don O'Brien

Mailing Address 1440 Welling Oaks Drive

City State Zip Code
Beaumont TX 77706

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

Name of Employer Occupation
GO-Burger. LP Businessman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 16 / 2012

Transaction ID : INCA610

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Sydney M. Baxter

Mailing Address 6360 N. Burton Ave.

City State Zip Code
San Gabriel CA 91775

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

Name of Employer Occupation
N/A Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : INCA637

Amount of Each Receipt this Period
250.00

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

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

3000.00

**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 16
	<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)
Jack Orswell for Congress

A. Full Name (Last, First, Middle Initial)
David H. Lehman

Mailing Address 3194 Fairpoint St.

City Pasadena State CA Zip Code 91107

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

Name of Employer JPL Pasadena Occupation Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : INCA614

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

6300.00

**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 16			
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Valencia and Associates			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 2149 E. Garvey Ave. North, Ste. A-			Amount of Each Disbursement this Period 11000.00 Transaction ID : EXPB550
City West Covina	State CA	Zip Code 91791	
Purpose of Disbursement Mailing - Absentee Ballots		Category/ Type 004	
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. Yes Marketing Group			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 15439 Newton Street			Amount of Each Disbursement this Period 500.00 Transaction ID : EXPB551
City Hacienda Heights	State CA	Zip Code 91745	
Purpose of Disbursement TV & Newspaper Ads		Category/ Type 004	
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) c. Yes Marketing Group			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 15439 Newton Street			Amount of Each Disbursement this Period 1100.00 Transaction ID : EXPB552
City Hacienda Heights	State CA	Zip Code 91745	
Purpose of Disbursement Meeting/Appearance		Category/ Type 007	
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:			

SUBTOTAL of Disbursements This Page (optional).....	12600.00
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 16			
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Campaign LA			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address 17211 S.Broadway St.			Amount of Each Disbursement this Period 3700.00 Transaction ID : EXPB558
City Gardena	State CA	Zip Code 90248	
Purpose of Disbursement Mass Mailing	Candidate Name		Category/ Type 006
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. John E Orswell			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 1161 Volante Dr.			Amount of Each Disbursement this Period 310.25 Transaction ID : EXPB599
City Arcadia	State CA	Zip Code 91007	
Purpose of Disbursement Local travel reimbursed	Candidate Name		Category/ Type 002
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) c. John E Orswell			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 1161 Volante Dr.			Amount of Each Disbursement this Period 210.00 Transaction ID : EXPB603
City Arcadia	State CA	Zip Code 91007	
Purpose of Disbursement USA Stick Flag	Candidate Name		Category/ Type 006
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:			

SUBTOTAL of Disbursements This Page (optional).....	4220.25
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 16
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. John E Orswell		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 1161 Volante Dr.		Amount of Each Disbursement this Period 328.56 Transaction ID : EXPB601
City Arcadia	State CA	
Zip Code 91007	Purpose of Disbursement Local travel reimbursed	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2002	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. San Gabriel Valley Newspaper Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address P.O. Box 54880		Amount of Each Disbursement this Period 379.50 Transaction ID : EXPB581
City Los Angeles	State CA	
Zip Code 90054	Purpose of Disbursement Ad - online advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2002	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Turner, Laub & Escovar		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 888 S. Figueroa St., Ste. 860		Amount of Each Disbursement this Period 2627.75 Transaction ID : EXPB583
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Accounting Services	Category/ Type 001
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	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3335.81
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 12 OF 16	
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. AOL Advertising Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address P.O. Box 5696		Amount of Each Disbursement this Period 500.00 Transaction ID : EXPB613
City New York	State NY	
Zip Code 10087	Purpose of Disbursement Online Advertising	Category/ Type 004
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	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Yes Marketing Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 15439 Newton Street		Amount of Each Disbursement this Period 1100.00 Transaction ID : EXPB612
City Hacienda Heights	State CA	
Zip Code 91745	Purpose of Disbursement TV Advertising	Category/ Type 004
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	
State: District:	Other (specify)	

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	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	21756.06

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC234

Jack Orswell for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

John E Orswell

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1161 Volante Dr.

City State ZIP Code
Arcadia CA 91007

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
20000.00 0.00 20000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
02 / 29 / 2012 M M / D D / 11/09/2012 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)..... 20000.00
TOTALS This Period (last page in this line only)..... 20000.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : PAYC234

Candidates personal funds

Form/Schedule:

Transaction ID:

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

NAME OF COMMITTEE (In Full)

Jack Orswell for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor John E Orswell		Nature of Debt (Purpose): Local travel reimbursed
Mailing Address 1161 Volante Dr.		
City	State	Zip Code
Arcadia	CA	91007

Outstanding Balance Beginning This Period	Transaction ID : PAYD592	
<input type="text" value="310.25"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="310.25"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor John E Orswell		Nature of Debt (Purpose): USA Stick Flag
Mailing Address 1161 Volante Dr.		
City	State	Zip Code
Arcadia	CA	91007

Outstanding Balance Beginning This Period	Transaction ID : PAYD593	
<input type="text" value="210.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="210.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor John E Orswell		Nature of Debt (Purpose): Local travel reimbursed
Mailing Address 1161 Volante Dr.		
City	State	Zip Code
Arcadia	CA	91007

Outstanding Balance Beginning This Period	Transaction ID : PAYD594	
<input type="text" value="328.56"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="328.56"/>	<input type="text" value="0.00"/>

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

NAME OF COMMITTEE (In Full)
Jack Orswell for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
San Gabriel Valley Newspaper Group

Mailing Address P.O. Box 54880

City State Zip Code
 Los Angeles CA 90054

Nature of Debt (Purpose):
 Ad - online advertising

Outstanding Balance Beginning This Period	Transaction ID : PAYD580	
379.50		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	379.50	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Turner, Laub & Escovar

Mailing Address 888 S. Figueroa St., Ste. 860

City State Zip Code
 Los Angeles CA 90017

Nature of Debt (Purpose):
 Accounting Services

Outstanding Balance Beginning This Period	Transaction ID : PAYD569	
2627.75		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	2627.75	0.00

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

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) ▶	