**REPORT OF RECEIPTS AND DISBURSEMENTS**

For An Authorized Committee

**1. NAME OF COMMITTEE (in full)**

*Type or Print* ▼

Example: If typing, type over the lines.

12FE4M5

**WAYNE TRUE FOR CONGRESS**

**ADDRESS (number and street)**

- 8750 SPRINGVIEW LANE
- LA MESA
- CA 91941

Check if different than previously reported. (ACC)

**2. FEC IDENTIFICATION NUMBER ▼**

<table>
<thead>
<tr>
<th>CITY ▲</th>
<th>STATE ▲</th>
<th>ZIP CODE ▲</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

- NEW (N)
- AMENDED (A)

**4. TYPE OF REPORT (Choose One)**

(a) Quarterly Reports:

- **[X] 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 **Y Y Y Y Y Y** in the State of

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

- **[ ] General (30G)**
- **[ ] Runoff (30R)**
- **[ ] Special (30S)**

Election on **Y Y Y Y Y Y** in the State of

**5. Covering Period**

- **M M / D D / Y Y Y Y** through **M M / D D / Y Y Y Y**

**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 **Mr. Larry John Darby**

Signature of Treasurer **Mr. Larry John Darby**

[Electronically Filed] Date **M M / D D / Y Y Y Y**

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

---

**WAYNE TRUE FOR CONGRESS**

Write or Type Committee Name

---

**Report Covering the Period:**

From: 01/01/2014  
To: 03/31/2014

---

<table>
<thead>
<tr>
<th></th>
<th>COLUMN A</th>
<th></th>
<th>COLUMN B</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>6. Net Contributions (other than loans)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Total Contributions</td>
<td>7214.00</td>
<td></td>
<td>7214.00</td>
<td></td>
</tr>
<tr>
<td>(other than loans)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(from Line 11(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b) Total Contribution Refunds</td>
<td>0.00</td>
<td></td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>(from Line 20(d))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(c) Net Contributions (other than loans)</td>
<td>7214.00</td>
<td></td>
<td>7214.00</td>
<td></td>
</tr>
<tr>
<td>(subtract Line 6(b) from Line 6(a))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7. Net Operating Expenditures</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Total Operating Expenditures</td>
<td>1760.04</td>
<td></td>
<td>1760.04</td>
<td></td>
</tr>
<tr>
<td>(from Line 17)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b) Total Offsets to Operating Expenditures (from Line 14)</td>
<td>0.00</td>
<td></td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>(c) Net Operating Expenditures</td>
<td>1760.04</td>
<td></td>
<td>1760.04</td>
<td></td>
</tr>
<tr>
<td>(subtract Line 7(b) from Line 7(a))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>8. Cash on Hand at Close of Reporting Period (from Line 27)</strong></td>
<td>5653.96</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)</strong></td>
<td>0.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)</strong></td>
<td>7014.52</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100
## I. RECEIPTS

### 11. CONTRIBUTIONS (other than loans) FROM:

<table>
<thead>
<tr>
<th>Subcategory</th>
<th>COLUMN A Total This Period</th>
<th>COLUMN B Election Cycle-to-Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Individuals/Persons Other Than Political Committees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) Itemized (use Schedule A)</td>
<td>4900.00</td>
<td>4900.00</td>
</tr>
<tr>
<td>(ii) Unitemized</td>
<td>2314.00</td>
<td>2314.00</td>
</tr>
<tr>
<td>(iii) TOTAL of contributions from individuals</td>
<td>7214.00</td>
<td>7214.00</td>
</tr>
<tr>
<td>(b) Political Party Committees</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) Other Political Committees (such as PACs)</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(d) The Candidate</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))</td>
<td>7214.00</td>
<td>7214.00</td>
</tr>
</tbody>
</table>

### 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

<table>
<thead>
<tr>
<th></th>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>0.00</td>
</tr>
</tbody>
</table>

### 13. LOANS:

<table>
<thead>
<tr>
<th>Subcategory</th>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Made or Guaranteed by the Candidate</td>
<td>200.00</td>
<td>200.00</td>
</tr>
<tr>
<td>(b) All Other Loans</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) TOTAL LOANS (add Lines 13(a) and (b))</td>
<td>200.00</td>
<td>200.00</td>
</tr>
</tbody>
</table>

### 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

<table>
<thead>
<tr>
<th></th>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>0.00</td>
</tr>
</tbody>
</table>

### 15. OTHER RECEIPTS (Dividends, Interest, etc.)

<table>
<thead>
<tr>
<th></th>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>0.00</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>7414.00</td>
</tr>
</tbody>
</table>
### II. DISBURSEMENTS

<table>
<thead>
<tr>
<th></th>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total This Period</td>
<td>Election Cycle-to-Date</td>
</tr>
<tr>
<td>17. OPERATING EXPENDITURES</td>
<td>$1760.04</td>
<td>$1760.04</td>
</tr>
<tr>
<td>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>19. LOAN REPAYMENTS:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Of Loans Made or Guaranteed by the Candidate</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>(b) Of All Other Loans</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>20. REFUNDS OF CONTRIBUTIONS TO:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Individuals/Persons Other Than Political Committees</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>(b) Political Party Committees</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>(c) Other Political Committees (such as PACs)</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>21. OTHER DISBURSEMENTS</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)</td>
<td>$1760.04</td>
<td>$1760.04</td>
</tr>
</tbody>
</table>

### III. CASH SUMMARY

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</td>
<td>$0.00</td>
</tr>
<tr>
<td>24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)</td>
<td>$7414.00</td>
</tr>
<tr>
<td>25. SUBTOTAL (add Line 23 and Line 24)</td>
<td>$7414.00</td>
</tr>
<tr>
<td>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</td>
<td>$1760.04</td>
</tr>
<tr>
<td>27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)</td>
<td>$5653.96</td>
</tr>
</tbody>
</table>
ITEMIZED RECEIPTS

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)
WAYNE TRUE FOR CONGRESS

Mr Donald Ashley
Mailing Address 7985 Rainey St

City
La Mesa
State CA
Zip Code 91942

FEC ID number of contributing federal political committee.
X C

Name of Employer
retired

Receipt For: 2014
X Primary

Date of Receipt
M / D / Y
03 / 03 / 2014

Transaction ID: SA11AL4113

Amount of Each Receipt this Period
campaign contribution

1000.00

Full Name (Last, First, Middle Initial)
Mr Bruce Bowling
Mailing Address P O Box 2383

City
La Mesa
State CA
Zip Code 91943

FEC ID number of contributing federal political committee.
X C

Name of Employer
Spectrum Securities

Occupation
Detention Officer

Receipt For: 2014
X Primary

Date of Receipt
M / D / Y
03 / 25 / 2014

Transaction ID: SA11AL4145

Amount of Each Receipt this Period
campaign donation

300.00

Full Name (Last, First, Middle Initial)
Mr James Elliott
Mailing Address 9217 Brier RD

City
La Mesa
State CA
Zip Code 91942

FEC ID number of contributing federal political committee.
X C

Name of Employer
Eye/Comm

Occupation
Marketing

Receipt For: 2014
X Primary

Date of Receipt
M / D / Y
03 / 06 / 2014

Transaction ID: SA11AL4121

Amount of Each Receipt this Period
campaign donation

1000.00

SUBTOTAL of Receipts This Page (optional)
2300.00

TOTAL This Period (last page this line number only)

FEC Schedule A (Form 3) (Revised 02/2009)
**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

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)

**WAYNE TRUE FOR CONGRESS**

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Keith Fischer</td>
</tr>
</tbody>
</table>

**Mailing Address**

3171 Greystone Dr

**City**

Jamul

**State**

CA

**Zip Code**

91935

**Date of Receipt**

03/11/2014

**Transaction ID**: SA11AL4127

**Amount of Each Receipt this Period**

$500.00

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

C

**Name of Employer**

Sharp Rees-Stealy Med Group

**Occupation**

Physician

**Receipt For:**

2014

**Primary**

- $300.00

**Other (specify)**

Election Cycle-to-Date

<table>
<thead>
<tr>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/11/2014</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Diego</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>CA</td>
<td>92131</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transaction ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>SA11AL4115</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/03/2014</td>
</tr>
</tbody>
</table>

**Amount of Each Receipt this Period**

$500.00

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

C

**Name of Employer**

Dr Frederick Orton

**Occupation**

retired

**Receipt For:**

2014

**Primary**

- $500.00

**Other (specify)**

Election Cycle-to-Date

<table>
<thead>
<tr>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/03/2014</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>11656 Vaca Place</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>CA</td>
<td>91935</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transaction ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>SA11AL4109</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/04/2014</td>
</tr>
</tbody>
</table>

**Amount of Each Receipt this Period**

$500.00

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

C

**Name of Employer**

Dr John Pauls

**Occupation**

Physician

**Receipt For:**

2014

**Primary**

- $500.00

**Other (specify)**

Election Cycle-to-Date

<table>
<thead>
<tr>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/04/2014</td>
</tr>
</tbody>
</table>

**Amount of Each Receipt this Period**

$500.00

**Transaction ID**: SA11AL4127

**Amount of Each Receipt this Period**

$300.00

**Transaction ID**: SA11AL4115

**Amount of Each Receipt this Period**

$500.00

**Transaction ID**: SA11AL4109

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

$1,300.00

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

$1,300.00
### NAME OF COMMITTEE (In Full)

**WAYNE TRUE FOR CONGRESS**

#### A. Mrs Barbara S True

- **Full Name (Last, First, Middle Initial):** Mrs Barbara S True
- **Mailing Address:** 8750 Springview Ln
- **City:** La Mesa
- **State:** CA
- **Zip Code:** 91941-5473
- **FEC ID number of contributing federal political committee:** C
- **Name of Employer:** Retired
- **Occupation:**
- **Receipt For:** 2014
  - **Primary:** 
  - **General:** 
  - **Other (specify):**
- **Date of Receipt:** 03/19/2014
- **Transaction ID:** SA11AL4195
- **Amount of Each Receipt this Period:** 300.00
- **Campaign donation:**

#### B. Mr Bruce Van Dam

- **Full Name (Last, First, Middle Initial):** Mr Bruce Van Dam
- **Mailing Address:** 5575 Simmons St #1-580
- **City:** North Las Vegas
- **State:** CA
- **Zip Code:** 89031
- **FEC ID number of contributing federal political committee:** C
- **Name of Employer:** Retired
- **Occupation:**
- **Receipt For:** 2014
  - **Primary:** 
  - **General:** 
  - **Other (specify):**
- **Date of Receipt:** 02/18/2014
- **Transaction ID:** SA11AL4249
- **Amount of Each Receipt this Period:** 500.00
- **Campaign donation:**

#### C. Mrs Benetta Wilson

- **Full Name (Last, First, Middle Initial):** Mrs Benetta Wilson
- **Mailing Address:** 6473 Del Paso Ave
- **City:** San Diego
- **State:** CA
- **Zip Code:** 92120
- **FEC ID number of contributing federal political committee:** C
- **Name of Employer:** Disabled
- **Occupation:** Disabled
- **Receipt For:** 2014
  - **Primary:** 
  - **General:** 
  - **Other (specify):**
- **Date of Receipt:** 02/17/2014
- **Transaction ID:** SA11AL4238
- **Amount of Each Receipt this Period:** 500.00
- **Campaign donation:**

### SUBTOTAL of Receipts This Page (optional)

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1300.00</td>
</tr>
<tr>
<td>4900.00</td>
</tr>
</tbody>
</table>

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

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1300.00</td>
</tr>
<tr>
<td>4900.00</td>
</tr>
</tbody>
</table>
### SCHEDULE A (FEC Form 3)

#### ITEMIZED RECEIPTS

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)**

**WAYNE TRUE FOR CONGRESS**

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Wayne S True</td>
<td>01 / 31 / 2014</td>
</tr>
</tbody>
</table>

**City**

**La Mesa**

**State**

**CA**

**Zip Code**

**91941-5473**

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

**C**

**H4CA53075**

**Name of Employer**

**Sharp Rees-Stealy Medical Grou**

**Occupation**

**Physician**

**Receipt For: 2014**

**Primary**

**General**

**Other (specify)**

**Election Cycle-to-Date**

**333.00**

**Transaction ID : SA11D.4226**

**Amount of Each Receipt this Period**

**133.00**

**Candidate to be reimbursed in later report period. P O Box rental USPS**

[MEMO ITEM]

---

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Wayne S True</td>
<td>02 / 05 / 2014</td>
</tr>
</tbody>
</table>

**City**

**La Mesa**

**State**

**CA**

**Zip Code**

**91941-5473**

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

**C**

**H4CA53075**

**Name of Employer**

**Sharp Rees-Stealy Medical Grou**

**Occupation**

**Physician**

**Receipt For: 2014**

**Primary**

**General**

**Other (specify)**

**Election Cycle-to-Date**

**587.09**

**Transaction ID : SA11D.4212**

**Amount of Each Receipt this Period**

**254.09**

**Candidate to be reimbursed, create a website GoDaddy**

[MEMO ITEM]

---

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Wayne S True</td>
<td>02 / 19 / 2014</td>
</tr>
</tbody>
</table>

**City**

**La Mesa**

**State**

**CA**

**Zip Code**

**91941-5473**

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

**C**

**H4CA53075**

**Name of Employer**

**Sharp Rees-Stealy Medical Grou**

**Occupation**

**Physician**

**Receipt For: 2014**

**Primary**

**General**

**Other (specify)**

**Election Cycle-to-Date**

**612.09**

**Transaction ID : SA11D.4286**

**Amount of Each Receipt this Period**

**25.00**

**Test PayPal process refund to candidate in later report period**

[MEMO ITEM]

---

**SUBTOTAL of Receipts This Page (optional) ................................................................. 0.00**

**TOTAL This Period (last page this line number only) ................................................. 0.00**
ITEMIZED RECEIPTS

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)**
WAYNE TRUE FOR CONGRESS

### A. Dr Wayne S True

- **Mailing Address**: 8750 Springview Lane  
- **City**: La Mesa  
- **State**: CA  
- **Zip Code**: 91941-5473

<table>
<thead>
<tr>
<th>Date of Receipt</th>
<th>Transaction ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>M M / D D / Y Y Y Y</td>
<td>SA11D.4214</td>
</tr>
</tbody>
</table>

**FEC ID number of contributing federal political committee.**  
C H4CA53075

**Name of Employer**  
Sharp Rees-Stealy Medical Group

**Occupation**  
Physician

**Receipt For:**  
- **Primary**: [X]  
- **General**: [ ]  
- **Other (specify)**: [ ]

**Election Cycle-to-Date**  
2617.09

**Amount of Each Receipt this Period**  
2005.00

Candidate to be reimbursed; Filing fees S D County registrar [MEMO ITEM]

### B. Dr Wayne S True

- **Mailing Address**: 8750 Springview Lane  
- **City**: La Mesa  
- **State**: CA  
- **Zip Code**: 91941-5473

<table>
<thead>
<tr>
<th>Date of Receipt</th>
<th>Transaction ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>M M / D D / Y Y Y Y</td>
<td>SA11D.4231</td>
</tr>
</tbody>
</table>

**FEC ID number of contributing federal political committee.**  
C H4CA53075

**Name of Employer**  
Sharp Rees-Stealy Medical Group

**Occupation**  
Physician

**Receipt For:**  
- **Primary**: [X]  
- **General**: [ ]  
- **Other (specify)**: [ ]

**Election Cycle-to-Date**  
2734.57

**Amount of Each Receipt this Period**  
117.48

Candidate to be reimbursed in later report period: Office Depot office supplies [MEMO ITEM]

### C. Dr Wayne S True

- **Mailing Address**: 8750 Springview Lane  
- **City**: La Mesa  
- **State**: CA  
- **Zip Code**: 91941-5473

<table>
<thead>
<tr>
<th>Date of Receipt</th>
<th>Transaction ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>M M / D D / Y Y Y Y</td>
<td>SA11D.4232</td>
</tr>
</tbody>
</table>

**FEC ID number of contributing federal political committee.**  
C H4CA53075

**Name of Employer**  
Sharp Rees-Stealy Medical Group

**Occupation**  
Physician

**Receipt For:**  
- **Primary**: [X]  
- **General**: [ ]  
- **Other (specify)**: [ ]

**Election Cycle-to-Date**  
2783.32

**Amount of Each Receipt this Period**  
48.75

Reimburse candidate later report: Postage stamsp CostCo [MEMO ITEM]

### SUBTOTAL of Receipts This Page (optional)
0.00

### TOTAL This Period (last page this line number only)
0.00
SCHEDULE A  (FEC Form 3)
ITEMIZED RECEIPTS

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.

<table>
<thead>
<tr>
<th>NAME OF COMMITTEE (In Full)</th>
<th>WAYNE TRUE FOR CONGRESS</th>
</tr>
</thead>
</table>

A. Full Name (Last, First, Middle Initial) Dr Wayne S True
Mailing Address 8750 Springview Lane

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>La Mesa</td>
<td>CA</td>
<td>91941-5473</td>
</tr>
</tbody>
</table>

FEC ID number of contributing federal political committee.

C H4CA53075

Name of Employer

Sharp Rees-Stealy Medical Grou

Occupation

Physician

Receipt For: 2014

Primary

General

Other (specify)

Election Cycle-to-Date

4314.52

Date of Receipt

03 / 21 / 2014

Transaction ID: SA11D.4237

Amount of Each Receipt this Period

1531.20

Reimburse candidate in later report: Filing fees S D Co Registrar

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Dr Wayne S True
Mailing Address 8750 Springview Lane

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>La Mesa</td>
<td>CA</td>
<td>91941-5473</td>
</tr>
</tbody>
</table>

FEC ID number of contributing federal political committee.

C H4CA53075

Name of Employer

Sharp Rees-Stealy Medical Grou

Occupation

Physician

Receipt For: 2014

Primary

General

Other (specify)

Election Cycle-to-Date

7014.52

Date of Receipt

03 / 24 / 2014

Transaction ID: SA11D.4215

Amount of Each Receipt this Period

2700.00

Candidate to be reimbursed: Red Stampede fund raiser

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Mailing Address

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify)

Election Cycle-to-Date

SUBTOTAL of Receipts This Page (optional) ...

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

0.00

0.00
### SCHEDULE A (FEC Form 3)

#### ITEMIZED RECEIPTS

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)**

WAYNE TRUE FOR CONGRESS

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Dr Wayne S True</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td>8750 Springview Lane</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>La Mesa</td>
<td>CA</td>
</tr>
<tr>
<td>FEC ID number of contributing federal political committee.</td>
<td>H4CA53075</td>
</tr>
</tbody>
</table>

#### A.

**Receipt For:** 2014

- **Primary**
- **General**
- **Other (specify)**

**Election Cycle-to-Date**

**Amount of Each Receipt this Period**

- **200.00**

**Date of Receipt**

- **01/28/2014**

**Transaction ID:** SA13A.4201

**Open Campaign committee checking account**

**Name of Employer**

Sharp Rees-Stealy Medical Group

**Occupation**

Physician

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>WAYNE TRUE FOR CONGRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td>Open Campaign committee checking account</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td></td>
<td>CA</td>
</tr>
<tr>
<td>FEC ID number of contributing federal political committee.</td>
<td>H4CA53075</td>
</tr>
</tbody>
</table>

#### B.

**Receipt For:** 2014

- **Primary**
- **General**
- **Other (specify)**

**Election Cycle-to-Date**

**Amount of Each Receipt this Period**

- **200.00**

**Date of Receipt**

- **01/28/2014**

**Transaction ID:** SA13A.4201

**Open Campaign committee checking account**

**Name of Employer**

Sharp Rees-Stealy Medical Group

**Occupation**

Physician

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>WAYNE TRUE FOR CONGRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td>Open Campaign committee checking account</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td></td>
<td>CA</td>
</tr>
<tr>
<td>FEC ID number of contributing federal political committee.</td>
<td>H4CA53075</td>
</tr>
</tbody>
</table>

#### C.

**Receipt For:** 2014

- **Primary**
- **General**
- **Other (specify)**

**Election Cycle-to-Date**

**Amount of Each Receipt this Period**

- **200.00**

**Date of Receipt**

- **01/28/2014**

**Transaction ID:** SA13A.4201

**Open Campaign committee checking account**

**Name of Employer**

Sharp Rees-Stealy Medical Group

**Occupation**

Physician

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>WAYNE TRUE FOR CONGRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td>Open Campaign committee checking account</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td></td>
<td>CA</td>
</tr>
<tr>
<td>FEC ID number of contributing federal political committee.</td>
<td>H4CA53075</td>
</tr>
</tbody>
</table>

### SUBTOTAL of Receipts This Page (optional)

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>200.00</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>200.00</td>
</tr>
</tbody>
</table>

---

FEC Schedule A (Form 3) (Revised 02/2009)
**Schedule B (FEC Form 3)**

**Itemized Disbursements**

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)**

Wayne True for Congress

**Full Name (Last, First, Middle Initial)**

A. Carol Sonstein

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>P.O. Box 286</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>La Jolla</td>
</tr>
<tr>
<td>State</td>
<td>CA</td>
</tr>
<tr>
<td>Zip Code</td>
<td>92038</td>
</tr>
</tbody>
</table>

**Purpose of Disbursement**

Photography session for website & advertising

**Candidate Name**

<table>
<thead>
<tr>
<th>Office Sought</th>
<th>Disbursement For:</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>House</td>
<td>2014 Primary</td>
<td></td>
</tr>
<tr>
<td>Senate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>President</td>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

**State:** CA  
**District:**

**Amount of Each Disbursement this Period**

Transaction ID: SB17.4175

- **Date of Disbursement**
  - M M / D D / Y Y Y Y
  - 03 / 28 / 2014

- **Amount of Each Disbursement this Period**
  - 295.92

B. Continuing the Republican Revolution

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>1300 Bristol St Suite 100</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>Newport Beach</td>
</tr>
<tr>
<td>State</td>
<td>CA</td>
</tr>
<tr>
<td>Zip Code</td>
<td>92660</td>
</tr>
</tbody>
</table>

**Purpose of Disbursement**

Slate mailer

**Candidate Name**

<table>
<thead>
<tr>
<th>Office Sought</th>
<th>Disbursement For:</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>House</td>
<td>2014 Primary</td>
<td></td>
</tr>
<tr>
<td>Senate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>President</td>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

**State:** CA  
**District:**

**Amount of Each Disbursement this Period**

Transaction ID: SB17.4179

- **Date of Disbursement**
  - M M / D D / Y Y Y Y
  - 03 / 30 / 2014

- **Amount of Each Disbursement this Period**
  - 1200.00

C. 

<table>
<thead>
<tr>
<th>Mailing Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
</tr>
<tr>
<td>State</td>
</tr>
<tr>
<td>Zip Code</td>
</tr>
</tbody>
</table>

**Purpose of Disbursement**

**Candidate Name**

<table>
<thead>
<tr>
<th>Office Sought</th>
<th>Disbursement For:</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>House</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senate</td>
<td>Other (specify)</td>
<td></td>
</tr>
<tr>
<td>President</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**State:** CA  
**District:**

**Amount of Each Disbursement this Period**

- **Date of Disbursement**
  - M M / D D / Y Y Y Y
  - M M / D D / Y Y Y Y
  - M M / D D / Y Y Y Y

- **Amount of Each Disbursement this Period**
  - 1495.92

**Subtotal** of Disbursements This Page (optional)

**Total** This Period (last page this line number only)
**NAME OF COMMITTEE (In Full)**
WAYNE TRUE FOR CONGRESS

**LOAN SOURCE**
Full Name (Last, First, Middle Initial)  
Dr Wayne S True  

[PERSONAL FUNDS]

**Mailing Address**
8750 Springview Lane

**City**  
La Mesa  
**State**  
CA  
**ZIP Code**  
91941-5473

**Original Amount of Loan**  
200.00

**Cumulative Payment To Date**  
0.00

**Balance Outstanding at Close of This Period**  
200.00

**TERMS**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/15/2014</td>
<td>10/15/2014</td>
<td>0.00% (apr)</td>
<td>No</td>
</tr>
</tbody>
</table>

**List All Endorsers or Guarantors (if any) to Loan Source**

1. **Full Name (Last, First, Middle Initial)**
   Dr Wayne S True
   **Occupation**
   **Mailing Address**
   8750 Springview Lane
   **City**  
   La Mesa  
   **State**  
   CA  
   **ZIP Code**  
   91941-5473
   **Amount Guaranteed Outstanding:**

2. **Full Name (Last, First, Middle Initial)**
   **Occupation**
   **Mailing Address**
   8750 Springview Lane
   **City**  
   La Mesa  
   **State**  
   CA  
   **ZIP Code**  
   91941-5473
   **Amount Guaranteed Outstanding:**

3. **Full Name (Last, First, Middle Initial)**
   **Occupation**
   **Mailing Address**
   8750 Springview Lane
   **City**  
   La Mesa  
   **State**  
   CA  
   **ZIP Code**  
   91941-5473
   **Amount Guaranteed Outstanding:**

4. **Full Name (Last, First, Middle Initial)**
   **Occupation**
   **Mailing Address**
   8750 Springview Lane
   **City**  
   La Mesa  
   **State**  
   CA  
   **ZIP Code**  
   91941-5473
   **Amount Guaranteed Outstanding:**

**SUBTOTALS**
This Period This Page (optional) .......................................................... 200.00

**TOTALS**
This Period (last page in this line only) .................................................. 200.00

*Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.*
### WAYNE TRUE FOR CONGRESS

#### A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Dr Wayne S True

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>8750 Springview Lane</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>La Mesa</td>
</tr>
<tr>
<td>State</td>
<td>CA</td>
</tr>
<tr>
<td>Zip Code</td>
<td>91941-5473</td>
</tr>
</tbody>
</table>

**Outstanding Balance Beginning This Period**: 0.00

**Amount Incurred This Period**: 133.00

**Payment This Period**: 0.00

**Outstanding Balance at Close of This Period**: 133.00

**Nature of Debt (Purpose)**: Candidate to be reimbursed in later report period: P.O. Box rental, USPS

#### B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Dr Wayne S True

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>8750 Springview Lane</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>La Mesa</td>
</tr>
<tr>
<td>State</td>
<td>CA</td>
</tr>
<tr>
<td>Zip Code</td>
<td>91941-5473</td>
</tr>
</tbody>
</table>

**Outstanding Balance Beginning This Period**: 0.00

**Amount Incurred This Period**: 254.09

**Payment This Period**: 0.00

**Outstanding Balance at Close of This Period**: 254.09

**Nature of Debt (Purpose)**: to be reimbursed later reporting period: GoDaddy 25/2014

#### C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Dr Wayne S True

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>8750 Springview Lane</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>La Mesa</td>
</tr>
<tr>
<td>State</td>
<td>CA</td>
</tr>
<tr>
<td>Zip Code</td>
<td>91941-5473</td>
</tr>
</tbody>
</table>

**Outstanding Balance Beginning This Period**: 0.00

**Amount Incurred This Period**: 25.00

**Payment This Period**: 0.00

**Outstanding Balance at Close of This Period**: 25.00

**Nature of Debt (Purpose)**: Test PayPal process, refund to candidate in later report period

---

**1) SUBTOTALS** This Period This Page (optional) .......................................................... 412.09

**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)**

---

*FEC Schedule D (Form 3) (Revised 02/2003)*
## WAYNE TRUE FOR CONGRESS

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

Dr Wayne S True

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>8750 Springview Lane</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>La Mesa</td>
</tr>
<tr>
<td>State</td>
<td>CA</td>
</tr>
<tr>
<td>Zip Code</td>
<td>91941-5473</td>
</tr>
</tbody>
</table>

**Nature of Debt (Purpose):**

to be reimbursed later reporting period: Filing fees SD Co Registrar 3/7/14

| Outstanding Balance Beginning This Period | 0.00 |
| Amount Incurred This Period              |      |
| Payment This Period                      | 2005.00 |
| Outstanding Balance at Close of This Period | 2005.00 |

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

Dr Wayne S True

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>8750 Springview Lane</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>La Mesa</td>
</tr>
<tr>
<td>State</td>
<td>CA</td>
</tr>
<tr>
<td>Zip Code</td>
<td>91941-5473</td>
</tr>
</tbody>
</table>

**Nature of Debt (Purpose):**

Candidate to be reimbursed in later report period: Office Depot office supplies

| Outstanding Balance Beginning This Period | 0.00 |
| Amount Incurred This Period              |      |
| Payment This Period                      | 117.48 |
| Outstanding Balance at Close of This Period | 117.48 |

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

Dr Wayne S True

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>8750 Springview Lane</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>La Mesa</td>
</tr>
<tr>
<td>State</td>
<td>CA</td>
</tr>
<tr>
<td>Zip Code</td>
<td>91941-5473</td>
</tr>
</tbody>
</table>

**Nature of Debt (Purpose):**

Reimburse Candidate in later report period: Postage stamps CostCo

| Outstanding Balance Beginning This Period | 0.00 |
| Amount Incurred This Period              |      |
| Payment This Period                      | 48.75 |
| Outstanding Balance at Close of This Period | 48.75 |

### 1) SUBTOTALS

This Period This Page (optional)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 2) TOTALS

This Period (last page this line number only)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 3) TOTAL OUTSTANDING LOANS

from Schedule C (last page only)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

FEC Schedule D (Form 3) (Revised 02/2003)
## WAYNE TRUE FOR CONGRESS

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

**Dr Wayne S True**  
Mailing Address: 8750 Springview Lane  
City: La Mesa  
State: CA  
Zip Code: 91941-5473  

<table>
<thead>
<tr>
<th>Outstanding Balance Beginning This Period</th>
<th>0.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount Incurred This Period</td>
<td>2700.00</td>
</tr>
<tr>
<td>Payment This Period</td>
<td>0.00</td>
</tr>
</tbody>
</table>

**Transaction ID: SD10.4218**  
Nature of Debt (Purpose): To be reimbursed later reporting period: Red Stampede fund raiser 3/21/14

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

**Dr Wayne S True**  
Mailing Address: 8750 Springview Lane  
City: La Mesa  
State: CA  
Zip Code: 91941-5473  

<table>
<thead>
<tr>
<th>Outstanding Balance Beginning This Period</th>
<th>0.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount Incurred This Period</td>
<td>1531.20</td>
</tr>
<tr>
<td>Payment This Period</td>
<td>0.00</td>
</tr>
</tbody>
</table>

**Transaction ID: SD10.4291**  
Nature of Debt (Purpose): Reimburse Candidate in later report: Filing fees S D Co Registrar

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

Mailing Address:  
City:  
State:  
Zip Code:  

<table>
<thead>
<tr>
<th>Outstanding Balance Beginning This Period</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount Incurred This Period</td>
<td></td>
</tr>
<tr>
<td>Payment This Period</td>
<td></td>
</tr>
</tbody>
</table>

**Transaction ID: SD10.4291**  
Nature of Debt (Purpose):

---

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

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)