

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

15 APR 16 PM 5:25 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Rocky Chavez for U.S. Senate

ADDRESS (number and street)

32302 Camino Capistrano #214

Check if different than previously reported. (ACC)

San Juan Capistrano

CA

92675

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00573832

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

CA

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 M /

D D D /

Y Y 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

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / 01

D D D / 01

Y Y Y Y Y Y Y Y 2015

through

M M M / 03

D D D / 31

Y Y Y Y Y Y Y Y 2015

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

BARRETT GARCIA

Signature of Treasurer

Barrett Garcia

Date

M M M / 04

D D D / 14

Y Y Y Y Y Y Y Y 2015

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

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Rocky Chavez for U.S. Senate

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))...	12,030.00	12,030.00
(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))...	12,030.00	12,030.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	7,063.28	7,063.28
(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))...	7,063.28	7,063.28
8. Cash on Hand at Close of Reporting Period (from Line 27) ..	4,966.72	
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) ..	7,519.95	

For further information contact:

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

Toll Free 800-424-9530
Local 202-694-1100

1302011444069
1302011444069

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Rocky Chavez for U.S. Senate

Report Covering the Period: From:

M	M
01	

 /

D	D
01	

 /

Y	Y	Y	Y	Y	Y
2	0	1	5		

 To:

M	M
03	

 /

D	D
31	

 /

Y	Y	Y	Y	Y	Y
2	0	1	5		

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)...

11,050.00

11,050.00

(ii) Unitemized.....

980.00

980.00

(iii) TOTAL of contributions from individuals .

12,030.00

12,030.00

(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))..

12,030.00

12,030.00

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)...

12,030.00

12,030.00

1502014470
1502014470

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES ..	7,063.28	7,063.28
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	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	7,063.28	7,063.28

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD ...	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) ..	12,030.00
25. SUBTOTAL (add Line 23 and Line 24) ..	12,030.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) ...	7,063.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) ..	4,966.72

1502014441
1502014441

**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 1	OF 6
	<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)
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) Robert Noble		Date of Receipt 02 / 26 / 2015	
Mailing Address 4932 Wildwood Dr City State Zip Code Oceanside, CA 92057		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired	Election Cycle-to-Date 700.00	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Ellen Stotmeister		Date of Receipt 03 / 05 / 2015	
Mailing Address 225 Borrego Court City State Zip Code Oceanside, CA 92057		Amount of Each Receipt this Period 2,700.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Homemaker	Election Cycle-to-Date 2,700.00	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Kevin Stotmeister		Date of Receipt 03 / 05 / 2015	
Mailing Address 225 Borrego Court City State Zip Code Oceanside, CA 92057		Amount of Each Receipt this Period 2,700.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Federal Health Signs CEO	Election Cycle-to-Date 2,700.00	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	5,900.00
TOTAL This Period (last page this line number only).....	

15020144472
15020144403

**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 2 OF 6	
	<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)
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial)
Kenneth Kossoff

Mailing Address
6421 Smoketree Ave
City State Zip Code
Oak Park, CA 91377

Date of Receipt
MM / DD / YYYY
03 / 09 / 2015

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
250.00

Name of Employer: Panitz & Kossoff, LLP
Occupation: Attorney

Receipt For: P2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

B. Full Name (Last, First, Middle Initial)
Geoffrey VandenHeuvel

Mailing Address
8315 Merrill Ave
City State Zip Code
Chino, CA 91710

Date of Receipt
MM / DD / YYYY
03 / 09 / 2015

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
500.00

Name of Employer: Geoffrey VandenHeuvel
Occupation: Dairy Farmer

Receipt For: P2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

C. Full Name (Last, First, Middle Initial)
Robert Noble

Mailing Address
4932 Wildwood Dr
City State Zip Code
Oceanside, CA 92057

Date of Receipt
MM / DD / YYYY
03 / 16 / 2015

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
200.00

Name of Employer:
Occupation: Retired

Receipt For: P2016
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

SUBTOTAL of Receipts This Page (optional)..... 950.00

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

1500-2015-4446-5

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 3 OF 6	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) Sandra Chanis		Date of Receipt MM / DD / YYYY 03 / 17 / 2015	
Mailing Address 3970 Syme Drive City State Zip Code Carlsbad, CA 92008		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Name of Employer Sandra Chanis	
Occupation Business Owner		Election Cycle-to-Date 250.00	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Gregg Short		Date of Receipt MM / DD / YYYY 03 / 17 / 2015	
Mailing Address 6054 Corte Del Cedro City State Zip Code Carlsbad, CA 92011		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Name of Employer Waste Wise	
Occupation CBO		Election Cycle-to-Date 1,000.00	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Jubela, Joe		Date of Receipt MM / DD / YYYY 03 / 27 / 2015	
Mailing Address PO Box 461329 City State Zip Code San Diego, CA 92046		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Name of Employer	
Occupation Retired		Election Cycle-to-Date 500.00	
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	1,250.00
TOTAL This Period (last page this line number only).....	

150201444/4
150201444/5

**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 4 OF 6	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) Lopez, Fred		Date of Receipt 03 / 27 / 2015
Mailing Address 36063 Colverleaf Ave City State Zip Code Madera, CA 93636		Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C	Occupation Retired	
Name of Employer	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 200.00
Occupation Retired	Election Cycle-to-Date 200.00	

Full Name (Last, First, Middle Initial) Olvera, Carlos		Date of Receipt 03 / 27 / 2015
Mailing Address 24901 Danafir City State Zip Code Dana Point, CA 92629		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	Occupation Mayor	
Name of Employer City of Dana Point	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 250.00
Occupation Mayor	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Gregg Short		Date of Receipt 03 / 27 / 2015
Mailing Address 6054 Corte Del Cedro City State Zip Code Carlsbad, CA 92011		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Occupation CEO	
Name of Employer Waste Wise	Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Amount of Each Receipt this Period 1,000.00
Occupation CEO	Election Cycle-to-Date 1,000.00	

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

1502014475
155040114475

**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 6

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
Rocky Chavez for U.S. Senate

Full Name (Last, First, Middle Initial) Ace Nagata		Date of Receipt 03 / 30 / 2015
A. Mailing Address 1275 Sleeping Indian Road City State Zip Code Oceanside, CA 92057		Amount of Each Receipt this Period 1,000.00
FEC ID number of contributing federal political committee. C	Occupation Retired	
Name of Employer	Occupation Retired	Amount of Each Receipt this Period 1,000.00
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1,000.00	
Full Name (Last, First, Middle Initial) Shan Wang		Date of Receipt 03 / 30 / 2015
B. Mailing Address 6878 Via Borregos City State Zip Code Carlsbad, CA 92009		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	Occupation Business Consultant	
Name of Employer So Cal Sino-American Business Consulti	Occupation Business Consultant	Amount of Each Receipt this Period 250.00
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	
Full Name (Last, First, Middle Initial) Richard Berkau		Date of Receipt 03 / 31 / 2015
C. Mailing Address 380 Gemlcook Ave City State Zip Code Carlsbad, CA 92008		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Occupation Retired	
Name of Employer	Occupation Retired	Amount of Each Receipt this Period 500.00
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	
SUBTOTAL of Receipts This Page (optional).....		1,750.00
TOTAL This Period (last page this line number only).....		

**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 6	
<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) Rocky Chavez for U.S. Senate	
Full Name (Last, First, Middle Initial) Colleen O'Harra	
Mailing Address 766 Grey Hawke Way City State Zip Code Oceanside, CA 92057	
FEC ID number of contributing federal political committee. C	Date of Receipt MM / DD / YYYY 03 / 31 / 2015
Name of Employer Colleen O'Harra Occupation Attorney	Amount of Each Receipt this Period 100.00
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00
Full Name (Last, First, Middle Initial) Colleen O'Harra	
Mailing Address 766 Grey Hawke Way City State Zip Code Oceanside, CA 92057	
FEC ID number of contributing federal political committee. C	Date of Receipt MM / DD / YYYY 03 / 31 / 2015
Name of Employer Colleen O'Harra Occupation Attorney	Amount of Each Receipt this Period 150.00
Receipt For: P2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00
Full Name (Last, First, Middle Initial)	
Mailing Address	
City State Zip Code	
FEC ID number of contributing federal political committee. C	Date of Receipt
Name of Employer Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date
SUBTOTAL of Receipts This Page (optional).....	
TOTAL This Period (last page this line number only).....	

15020144468

**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 1 OF 4	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 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)
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) STA		Date of Disbursement MM / DD / YYYY 03 / 06 / 2015
Mailing Address 2549 East Bluff Ave #788		Amount of Each Disbursement this Period 1,011.42
City Newport Beach, CA	State Zip Code 92660	
Purpose of Disbursement Stationary	Category/Type 006	
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 <input type="checkbox"/> Other (specify)	
State: District:		

B. Full Name (Last, First, Middle Initial) Bieber Communications		Date of Disbursement MM / DD / YYYY 03 / 06 / 2015
Mailing Address 3609 W MacArthur Blvd #812		Amount of Each Disbursement this Period MEMO 1,011.52
City Santa Ana, CA	State Zip Code 92704	
Purpose of Disbursement Stationary	Category/Type 006	
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 <input type="checkbox"/> Other (specify)	
State: District:		

C. Full Name (Last, First, Middle Initial) Rocky Chavez		Date of Disbursement MM / DD / YYYY 03 / 12 / 2015
Mailing Address 4985 Calle Arquero		Amount of Each Disbursement this Period 1,644.76
City Oceanside, CA	State Zip Code 92057	
Purpose of Disbursement Event space and food	Category/Type 007	
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 <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	2,656.18
TOTAL This Period (last page this line number only)	

15020144178
15020144178

**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 2 OF 4

<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

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)
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) FedEx Office		Date of Disbursement 03 / 12 / 2015
Mailing Address 2444 Vista Way		Amount of Each Disbursement this Period MEMO 98.82
City Oceanside, CA 92054	State Zip Code	
Purpose of Disbursement Poster	007 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 <input type="checkbox"/> Other (specify)	
State: District:		

B. Full Name (Last, First, Middle Initial) The Crossings at Carlsbad		Date of Disbursement 03 / 12 / 2015
Mailing Address 5800 The Crossings Drive		Amount of Each Disbursement this Period MEMO 1,545.94
City Carlsbad, CA 92008	State Zip Code	
Purpose of Disbursement Event space and food	007 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 <input type="checkbox"/> Other (specify)	
State: District:		

C. Full Name (Last, First, Middle Initial) Grant Oliveira		Date of Disbursement 03 / 13 / 2015
Mailing Address 4504 32nd Street		Amount of Each Disbursement this Period 1,000.00
City San Diego, CA 92116	State Zip Code	
Purpose of Disbursement Consulting	001 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 <input type="checkbox"/> Other (specify)	
State: District:		

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

1,000.00

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

15020144479
15020144479

**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 3 OF 4	
	<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)
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Deluxe Business Forms		Date of Disbursement M / D Y Y 03 / 23 2015	
Mailing Address PO Box 64046		Amount of Each Disbursement this Period 240.63	
City State Zip Code St Paul, MN 55164		001	
Purpose of Disbursement Check supplies		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

B. Full Name (Last, First, Middle Initial) Phyllis Schneider & Associates		Date of Disbursement M M / D D / Y Y Y 03 / 25 / 2015	
Mailing Address 360 E. 1st Street #736		Amount of Each Disbursement this Period 1,000.00	
City State Zip Code Tustin, CA 92780		001	
Purpose of Disbursement Consulting		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 <input type="checkbox"/> Other (specify)		
State: District:			

C. Full Name (Last, First, Middle Initial) Sprint		Date of Disbursement M M / D D / Y Y Y 03 / 26 / 2015	
Mailing Address PO Box 4191		Amount of Each Disbursement this Period 677.98	
City State Zip Code Carol Stream, IL 60197		001	
Purpose of Disbursement Phone service		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 <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1,918.61
TOTAL This Period (last page this line number only)

15020144480

**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 4 OF 4

<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

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)
Rocky Chavez for U.S. Senate

A. Full Name (Last, First, Middle Initial) Benefit Mall		Date of Disbursement MM / DD / YYYY 03 / 31 / 2015
Mailing Address 2301 Campus Drive Suite 175		Amount of Each Disbursement this Period 245.85
City Irvine, CA 92612	State Zip Code	
Purpose of Disbursement Salaries and Payroll Taxes	001 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 <input type="checkbox"/> Other (specify)
State: District:		

B. Full Name (Last, First, Middle Initial) Benefit Mall		Date of Disbursement MM / DD / YYYY 03 / 31 / 2015
Mailing Address 2301 Campus Drive Suite 175		Amount of Each Disbursement this Period 59.91
City Irvine, CA 92612	State Zip Code	
Purpose of Disbursement Payroll Processing Fees	001 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 <input type="checkbox"/> Other (specify)
State: District:		

C. Full Name (Last, First, Middle Initial) Grant Oliveira		Date of Disbursement MM / DD / YYYY 03 / 31 / 2015
Mailing Address 4504 32nd Street		Amount of Each Disbursement this Period 871.65
City San Diego, CA 92116	State Zip Code	
Purpose of Disbursement Salaries	001 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 <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1,177.41
TOTAL This Period (last page this line number only).....	7,063.28

1150144901 2169771032051

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)

Rocky Chavez for U.S. Senate

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

Communications Lab

Nature of Debt (Purpose):

Professional Fees

Mailing Address

701 E Chapman Ave

City State

Zip Code

Orange, CA

92866 -

Outstanding Balance Beginning This Period

0.00

Amount Incurred This Period

7,519.95

Payment This Period

0.00

Outstanding Balance at Close of This Period

7,519.95

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

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)

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)




7,519.95

7,519.95

15020144462
15020144462

PRIORITY MAIL
POSTAGE REQUIRED

PRESS FIRMLY TO SEAL





 UNITED STATES POSTAL SERVICE®		Click-N-Ship®	
<h1>P</h1>	usps.com \$5.05 US POSTAGE Flat Rate Env	9405 5036 9930 0035 7200 64 0050 5000 0082 0013  Commercial Base Pricing	
	04/14/15	Mailed from 92875 082S0000001308	
	PRIORITY MAIL 2-DAY™		
BARRETT GARCIA BARRETT GARCIA AND CO. 32302 CAMINO CAPISTRANO STE 214 SAN JUAN CAPO CA 92675-4506		Expected Delivery Date: 04/16/15 0006	
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> B078 </div>			
SHIP TO: SECRETARY OF THE SENATE OFFICE OF PUBLIC RECORDS PO BOX 77578 WASHINGTON DC 20013-8578			
USPS TRACKING #			
			
9405 5036 9930 0035 7200 64			
Electronic Rate Approved #038555749			



VISIT US AT **USPS.COM®**
ORDER FREE SUPPLIES ONLINE

PRESS FIRMLY TO SEAL

PRIORITY® ★ MAIL ★

-  DATE OF DELIVERY SPECIFIED*
-  USPS TRACKING™ INCLUDED*
-  INSURANCE INCLUDED*
-  PICKUP AVAILABLE*

SCREENED BY THE SENATE POST OFFICE

* Domestic only

WHEN USED INTERNATIONALLY
A CUSTOMS DECLARATION
LABEL MAY BE REQUIRED



EP14F July 2013
CN 12.5 x 9.5

000001000014

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL 4/14/15
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

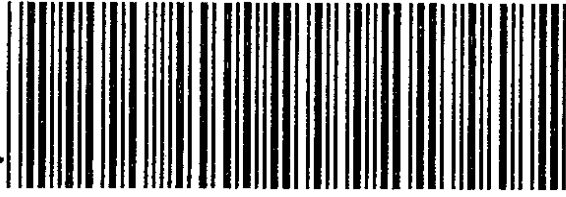
POSTMARK ILLEGIBLE POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

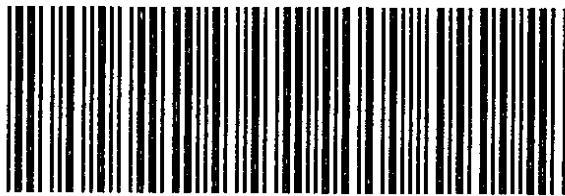
PREPARER MN DATE PREPARED 4/16/15

15020144435



SEN PATCH

1502014448755
15020144483



SEN PATCH