FEC FORM 3
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.
   MICHAEL SAN NICOLAS FOR CONGRESS

ADDRESS (number and street)
▼
   198 W. SANTA BARBARA AVE.
   Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼
   C C00668335

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

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
   11/06/2018
   State

   (c) 30-Day POST-Election Report for the:
   ✗ General (30G)
   ■ Runoff (30R)
   ■ Special (30S)
   Election on
   11/26/2018
   State

5. Covering Period
   11/10/2018 through 11/26/2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Calvo, Shelly, , ,

Signature of Treasurer
[Electronically Filed] Date
11/25/2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.
### REPORT COVERING PERIOD:

**From:**

- **MM/DD/YYYY:** 10/18/2018

**To:**

- **MM/DD/YYYY:** 11/26/2018

### COLUMN A

**This Period**

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Contributions (other than loans) (from Line 11(e))</td>
<td>13650.00</td>
</tr>
<tr>
<td>Total Contribution Refunds (from Line 20(d))</td>
<td>0.00</td>
</tr>
<tr>
<td>Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))</td>
<td>13650.00</td>
</tr>
<tr>
<td>Total Operating Expenditures (from Line 17)</td>
<td>14160.00</td>
</tr>
<tr>
<td>Total Offsets to Operating Expenditures (from Line 14)</td>
<td>0.00</td>
</tr>
<tr>
<td>Net Operating Expenditures (subtract Line 7(b) from Line 7(a))</td>
<td>14160.00</td>
</tr>
<tr>
<td>Cash on Hand at Close of Reporting Period (from Line 27)</td>
<td>58262.86</td>
</tr>
</tbody>
</table>

### COLUMN B

**Election Cycle-to-Date**

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Contributions (other than loans)</td>
<td>88164.00</td>
</tr>
<tr>
<td>Total Contribution Refunds</td>
<td>0.00</td>
</tr>
<tr>
<td>Net Contributions (other than loans)</td>
<td>88164.00</td>
</tr>
<tr>
<td>Total Operating Expenditures</td>
<td>43422.00</td>
</tr>
<tr>
<td>Total Offsets to Operating Expenditures</td>
<td>0.00</td>
</tr>
<tr>
<td>Net Operating Expenditures</td>
<td>43422.00</td>
</tr>
<tr>
<td>Cash on Hand at Close of Reporting Period</td>
<td>58262.86</td>
</tr>
<tr>
<td>Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)</td>
<td>0.00</td>
</tr>
<tr>
<td>Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)</td>
<td>16520.86</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

<table>
<thead>
<tr>
<th>COLUMN A</th>
<th>COLUMN B</th>
<th>COLUMN C</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total this Period</strong></td>
<td><strong>Election Cycle Total as of</strong></td>
<td><strong>Total for</strong></td>
</tr>
<tr>
<td>(date of general election)</td>
<td>(last day of reporting period)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FROM:</th>
<th>TO:</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/18/2018</td>
<td>11/26/2018</td>
</tr>
</tbody>
</table>

### 11. CONTRIBUTIONS (other than loans) FROM:
- (a) Individuals/Persons Other than Political Committees
  - (i) Itemized (use Schedule A)
  - (ii) Unitemized
  - (iii) Total of contributions from individuals
- (b) Political Party Committees
- (c) Other Political Committees

<table>
<thead>
<tr>
<th>FROM:</th>
<th>TO:</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/06/2018</td>
<td>11/07/2018</td>
</tr>
<tr>
<td>11/26/2018</td>
<td>11/26/2018</td>
</tr>
<tr>
<td>12200.00</td>
<td>67092.00</td>
</tr>
<tr>
<td>450.00</td>
<td>18572.00</td>
</tr>
<tr>
<td>12650.00</td>
<td>85664.00</td>
</tr>
<tr>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>1000.00</td>
<td>1000.00</td>
</tr>
<tr>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>COLUMN A</td>
<td>COLUMN B: Election Cycle Total as of * (date of general election)</td>
</tr>
<tr>
<td>----------</td>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>d) The Candidate</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td><strong>(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>13650.00</td>
</tr>
<tr>
<td><strong>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td><strong>13. LOANS:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>(a) Made or Guaranteed by the Candidate</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2551.34</td>
</tr>
<tr>
<td><strong>(b) All Other Loans</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td><strong>(c) TOTAL LOANS (add Lines 13(a) and (b))</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2551.34</td>
</tr>
<tr>
<td><strong>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td><strong>15. OTHER RECEIPTS (Dividends, Interest, etc.)</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td><strong>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>16201.34</td>
</tr>
</tbody>
</table>
### II. DISBURSEMENTS

<table>
<thead>
<tr>
<th>COLUMN A</th>
<th>COLUMN B</th>
<th>COLUMN C</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total this Period</strong></td>
<td><strong>Election Cycle Total as of</strong> (date of general election)</td>
<td><strong>Total for</strong> (date after general election) through (last day of reporting period)</td>
</tr>
<tr>
<td>17. OPERATING EXPENDITURES</td>
<td>14160.00</td>
<td>43422.00</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>19840.49</td>
<td>34296.15</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 19(b))</td>
<td>19840.49</td>
<td>34296.15</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>
</tbody>
</table>
### III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

<table>
<thead>
<tr>
<th>COLUMN A</th>
<th>COLUMN B</th>
<th>COLUMN C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total this Period</td>
<td>Election Cycle Total as of *</td>
<td>Total for * through *</td>
</tr>
<tr>
<td>(c) Other Political Committees (such as PACs)</td>
<td>(date of general election)</td>
<td>(date after general election)</td>
</tr>
<tr>
<td></td>
<td>(*) See page 5 for date</td>
<td>(*) See page 5 for dates</td>
</tr>
<tr>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>

### IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

<table>
<thead>
<tr>
<th>COLUMN A</th>
<th>COLUMN B</th>
<th>COLUMN C</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13650.00</td>
<td>88164.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>

### V. CASH SUMMARY

<table>
<thead>
<tr>
<th>COLUMN A</th>
<th>COLUMN B</th>
<th>COLUMN C</th>
</tr>
</thead>
<tbody>
<tr>
<td>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</td>
<td></td>
<td>76062.01</td>
</tr>
<tr>
<td>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</td>
<td></td>
<td>16201.34</td>
</tr>
<tr>
<td>25. SUBTOTAL (add Line 23 and Line 24)</td>
<td></td>
<td>92263.35</td>
</tr>
<tr>
<td>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</td>
<td></td>
<td>34000.49</td>
</tr>
<tr>
<td>27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)</td>
<td></td>
<td>58262.86</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)**

MICHAEL SAN NICOLAS FOR CONGRESS

#### A.

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

Alcorn, David,

**Mailing Address**

PO Box L

**City**

Hagatna

**State**

GU

**Zip Code**

96932

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

C

**Name of Employer**

GFS Group

**Occupation**

President

**Receipt For:**

Primary

**Date of Receipt**

10 / 26 / 2018

**Transaction ID : SA11AI.4511**

**Amount of Each Receipt this Period**

2000.00

**Memo Item**


#### B.

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

Alcorn, Derek,

**Mailing Address**

PO Box L

**City**

Hagatna

**State**

GU

**Zip Code**

96932

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

C

**Name of Employer**

King's Restaurant LLC

**Occupation**

Vice President

**Receipt For:**

Primary

**Date of Receipt**

10 / 26 / 2018

**Transaction ID : SA11AI.4521**

**Amount of Each Receipt this Period**

1000.00

**Memo Item**


#### C.

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

Alcorn, Nicholas,

**Mailing Address**

20800 W. Homestead Rd.

**City**

Cupertino

**State**

CA

**Zip Code**

95014

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

C

**Name of Employer**

DaVinci Financial

**Occupation**

Agent

**Receipt For:**

1000

**Date of Receipt**

10 / 26 / 2018

**Transaction ID : SA11AI.4517**

**Amount of Each Receipt this Period**

1000.00

**Memo Item**


### SUBTOTAL of Receipts This Page (optional)

4000.00

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

4000.00

---

*FEC Schedule A (Form 3) (Revised 05/2016)*
### NAME OF COMMITTEE (In Full)

**MICHAEL SAN NICOLAS FOR CONGRESS**

#### A.

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

Bustamante, Luis, ,

**Mailing Address**

215 Rojas St.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tamuning</td>
<td>GU</td>
<td></td>
</tr>
</tbody>
</table>

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

C

**Name of Employer**

JJ Global

**Occupation**

President

**Receipt For:**

- Primary
- General

**Date of Receipt**

10/23/2018

**Transaction ID:** SA11AI.4505

<table>
<thead>
<tr>
<th>Amount of Each Receipt this Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>1000.00</td>
</tr>
</tbody>
</table>

**Memo Item**

#### B.

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

Cassidy, Michael, ,

**Mailing Address**

376 W. O'Brien Drive

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hagatna</td>
<td>GU</td>
<td>96932</td>
</tr>
</tbody>
</table>

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

C

**Name of Employer**

Cassidy's Insurance

**Occupation**

Executive

**Receipt For:**

- Primary
- General

**Date of Receipt**

10/23/2018

**Transaction ID:** SA11AI.4496

<table>
<thead>
<tr>
<th>Amount of Each Receipt this Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>1000.00</td>
</tr>
</tbody>
</table>

**Memo Item**

#### C.

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

Cassidy, William, West-L-G, ,

**Mailing Address**

PO Box 3560

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hagatna</td>
<td>GU</td>
<td></td>
</tr>
</tbody>
</table>

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

C

**Name of Employer**

Pacific Indemnity Insurance Co

**Occupation**

Executive Vice President

**Receipt For:**

- Primary
- General

**Date of Receipt**

10/23/2018

**Transaction ID:** SA11AI.4499

<table>
<thead>
<tr>
<th>Amount of Each Receipt this Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>1000.00</td>
</tr>
</tbody>
</table>

**Memo Item**

<table>
<thead>
<tr>
<th>Amount of Each Receipt this Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>3000.00</td>
</tr>
</tbody>
</table>

**Memo Item**

### SUBTOTAL of Receipts This Page (optional)

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>3000.00</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>3000.00</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)**

MICHAEL SAN NICOLAS FOR CONGRESS

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concepcion, Priscilla, , ,</td>
<td>M M / D D / Y Y Y Y</td>
</tr>
<tr>
<td>Mailing Address PO box 6611</td>
<td>10 / 26 / 2018</td>
</tr>
<tr>
<td>City</td>
<td>GU</td>
</tr>
<tr>
<td>Tamuning</td>
<td>96931</td>
</tr>
<tr>
<td>FEC ID number of contributing</td>
<td>C</td>
</tr>
<tr>
<td>federal political committee.</td>
<td></td>
</tr>
<tr>
<td>Name of Employer</td>
<td></td>
</tr>
<tr>
<td>GFS Group</td>
<td>Occupation</td>
</tr>
<tr>
<td>Receipt For: 2018</td>
<td></td>
</tr>
<tr>
<td>Primary □ General □ Other (specify) ▼</td>
<td>Election Cycle-to-Date ▼</td>
</tr>
<tr>
<td>□ 1000.00</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gutierrez, Darren, , ,</td>
<td>M M / D D / Y Y Y Y</td>
</tr>
<tr>
<td>Mailing Address PO Box 1724</td>
<td>10 / 26 / 2018</td>
</tr>
<tr>
<td>City</td>
<td>GU</td>
</tr>
<tr>
<td>Hagatna</td>
<td>96932</td>
</tr>
<tr>
<td>FEC ID number of contributing</td>
<td>C</td>
</tr>
<tr>
<td>federal political committee.</td>
<td></td>
</tr>
<tr>
<td>Name of Employer</td>
<td></td>
</tr>
<tr>
<td>G-Crew Maintenance</td>
<td>Occupation</td>
</tr>
<tr>
<td>Receipt For: 2018</td>
<td></td>
</tr>
<tr>
<td>Primary □ General □ Other (specify) ▼</td>
<td>Election Cycle-to-Date ▼</td>
</tr>
<tr>
<td>□ 450.00</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mariano, Jay, , ,</td>
<td>M M / D D / Y Y Y Y</td>
</tr>
<tr>
<td>Mailing Address PO Box 2167</td>
<td>10 / 26 / 2018</td>
</tr>
<tr>
<td>City</td>
<td>GU</td>
</tr>
<tr>
<td>Hagatna</td>
<td>96932</td>
</tr>
<tr>
<td>FEC ID number of contributing</td>
<td>C</td>
</tr>
<tr>
<td>federal political committee.</td>
<td></td>
</tr>
<tr>
<td>Name of Employer</td>
<td></td>
</tr>
<tr>
<td>GFS Group</td>
<td>Occupation</td>
</tr>
<tr>
<td>Receipt For: 2018</td>
<td></td>
</tr>
<tr>
<td>Primary □ General □ Other (specify) ▼</td>
<td>Election Cycle-to-Date ▼</td>
</tr>
<tr>
<td>□ 1000.00</td>
<td></td>
</tr>
</tbody>
</table>

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

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

---

FEC Schedule A (Form 3) (Revised 05/2016)
<table>
<thead>
<tr>
<th>NAME OF COMMITTEE (In Full)</th>
<th>MICHAEL SAN NICOLAS FOR CONGRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Name (Last, First, Middle Initial)</td>
<td>Montinola, Louie, , ,</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>PO Box L</td>
</tr>
<tr>
<td>City</td>
<td>Agana</td>
</tr>
<tr>
<td>State</td>
<td>GU</td>
</tr>
<tr>
<td>Zip Code</td>
<td>96932</td>
</tr>
<tr>
<td>FEC ID number of contributing federal political committee.</td>
<td>C</td>
</tr>
<tr>
<td>Name of Employer</td>
<td>GFS Group</td>
</tr>
<tr>
<td>Occupation</td>
<td>Manager</td>
</tr>
<tr>
<td>Receipt For: Primary</td>
<td>☑ General</td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
<tr>
<td>Election Cycle-to-Date ▼</td>
<td>1000.00</td>
</tr>
<tr>
<td>Date of Receipt</td>
<td>M / D / Y</td>
</tr>
<tr>
<td>Transaction ID</td>
<td>SA11AI.4513</td>
</tr>
<tr>
<td>Amount of Each Receipt this Period</td>
<td>1000.00</td>
</tr>
<tr>
<td>Memo Item</td>
<td>☐</td>
</tr>
</tbody>
</table>

| Full Name (Last, First, Middle Initial) | Pothen, Matthew, , , |
| Mailing Address | PO Box 13024 |
| City | Santa Rita |
| State | GU |
| Zip Code | 96915 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Guam Shipyard |
| Occupation | President |
| Receipt For: Primary | ☑ General |
| Other (specify) | |
| Election Cycle-to-Date ▼ | 1000.00 |
| Date of Receipt | M / D / Y | 10 / 29 / 2018 |
| Transaction ID | SA11AI.4533 |
| Amount of Each Receipt this Period | 1000.00 |
| Memo Item | ☐ |

| Full Name (Last, First, Middle Initial) | Ramos, Renerio, , , |
| Mailing Address | PO Box 11864 |
| City | Tamuning |
| State | GU |
| Zip Code | 96931 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | MedPharm |
| Occupation | President |
| Receipt For: Primary | ☑ General |
| Other (specify) | |
| Election Cycle-to-Date ▼ | 3000.00 |
| Date of Receipt | M / D / Y | 10 / 23 / 2018 |
| Transaction ID | SA11AI.4504 |
| Amount of Each Receipt this Period | 3000.00 |
| Memo Item | ☐ |

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

FEC Schedule A (Form 3) (Revised 05/2016)
### ITEMIZED RECEIPTS

**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

**Mailing Address** 555 12th St

**City**

Oakland

**State**

CA

**Zip Code**

94607

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

C  C00024752

**Name of Employer**

Matson Inc Federal Election Committee

**Occupation**

**Election Cycle-to-Date**

1000.00

**Date of Receipt**

10 / 29 / 2018

**Transaction ID** : SA11C.4523

**Amount of Each Receipt this Period**

1000.00

**Memo Item**


---

**Receipt For:**

**Primary**

**General**

**Other (specify)**


---

**B.**

**Mailing Address**

**City**

**State**

**Zip Code**

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

C

**Name of Employer**

**Occupation**

**Election Cycle-to-Date**

**Date of Receipt**

**Amount of Each Receipt this Period**

**Memo Item**


---

**Receipt For:**

**Primary**

**General**

**Other (specify)**


---

**C.**

**Mailing Address**

**City**

**State**

**Zip Code**

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

C

**Name of Employer**

**Occupation**

**Election Cycle-to-Date**

**Date of Receipt**

**Amount of Each Receipt this Period**

**Memo Item**


---

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

1000.00

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

1000.00
**NAME OF COMMITTEE** (In Full)

**MICHAEL SAN NICOLAS FOR CONGRESS**

**A.**

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>FEC ID number of contributing federal political committee.</th>
<th>Date of Receipt</th>
<th>Amount of Each Receipt this Period</th>
<th>Memo Item</th>
<th>Transaction ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
<td>C H8GU01020</td>
<td>10/25/2018</td>
<td>2551.34</td>
<td>Facebook Ads</td>
<td>SA13A.4507</td>
</tr>
</tbody>
</table>

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

**SAN NICOLAS, MICHAEL F.Q. MR., , ,**

Mailing Address 198 W. SANTA BARBARA AVE.

**B.**

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>FEC ID number of contributing federal political committee.</th>
<th>Date of Receipt</th>
<th>Amount of Each Receipt this Period</th>
<th>Memo Item</th>
</tr>
</thead>
</table>

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

**C.**

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>FEC ID number of contributing federal political committee.</th>
<th>Date of Receipt</th>
<th>Amount of Each Receipt this Period</th>
<th>Memo Item</th>
</tr>
</thead>
</table>

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

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

**2551.34**

**2551.34**
## 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)

MICHAEL SAN NICOLAS FOR CONGRESS

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Disbursement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Choice Broadcasting</strong></td>
<td>MM / DD / YYYY</td>
</tr>
<tr>
<td>Mailing Address: 543A North Marine Corps Drive</td>
<td>10 / 23 / 2018</td>
</tr>
<tr>
<td>City: Tamuning</td>
<td></td>
</tr>
<tr>
<td>State GU</td>
<td></td>
</tr>
<tr>
<td>Zip Code: 96913</td>
<td></td>
</tr>
<tr>
<td>Purpose of Disbursement Radio Ad</td>
<td></td>
</tr>
<tr>
<td>Candidate Name</td>
<td></td>
</tr>
<tr>
<td>Office Sought:</td>
<td></td>
</tr>
<tr>
<td>Senate</td>
<td></td>
</tr>
<tr>
<td>President</td>
<td></td>
</tr>
<tr>
<td>Disbursement For: 2018</td>
<td></td>
</tr>
<tr>
<td>Primary</td>
<td></td>
</tr>
<tr>
<td>General</td>
<td></td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
<tr>
<td>State: District:</td>
<td></td>
</tr>
<tr>
<td>Transaction ID: SB17.4502</td>
<td></td>
</tr>
<tr>
<td>Amount of Each Disbursement this Period</td>
<td></td>
</tr>
<tr>
<td>529.00</td>
<td></td>
</tr>
<tr>
<td>Memo Item</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Disbursement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>B. Guam SuperShopper</strong></td>
<td>MM / DD / YYYY</td>
</tr>
<tr>
<td>Mailing Address: 167 Serenu Ave</td>
<td>10 / 18 / 2018</td>
</tr>
<tr>
<td>City: Tamuning</td>
<td></td>
</tr>
<tr>
<td>State GU</td>
<td></td>
</tr>
<tr>
<td>Zip Code: 96913</td>
<td></td>
</tr>
<tr>
<td>Purpose of Disbursement Print Ad</td>
<td></td>
</tr>
<tr>
<td>Candidate Name</td>
<td></td>
</tr>
<tr>
<td>Office Sought:</td>
<td></td>
</tr>
<tr>
<td>Senate</td>
<td></td>
</tr>
<tr>
<td>President</td>
<td></td>
</tr>
<tr>
<td>Disbursement For: 2018</td>
<td></td>
</tr>
<tr>
<td>Primary</td>
<td></td>
</tr>
<tr>
<td>General</td>
<td></td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
<tr>
<td>State: District:</td>
<td></td>
</tr>
<tr>
<td>Transaction ID: SB17.4503</td>
<td></td>
</tr>
<tr>
<td>Amount of Each Disbursement this Period</td>
<td></td>
</tr>
<tr>
<td>1760.00</td>
<td></td>
</tr>
<tr>
<td>Memo Item</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Disbursement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>C. Guam Times, LLC</strong></td>
<td>MM / DD / YYYY</td>
</tr>
<tr>
<td>Mailing Address: 388 S. marine Corps Drive</td>
<td>10 / 30 / 2018</td>
</tr>
<tr>
<td>City: Tamuning</td>
<td></td>
</tr>
<tr>
<td>State GU</td>
<td></td>
</tr>
<tr>
<td>Zip Code: 96913</td>
<td></td>
</tr>
<tr>
<td>Purpose of Disbursement Print Ad</td>
<td></td>
</tr>
<tr>
<td>Candidate Name</td>
<td></td>
</tr>
<tr>
<td>Office Sought:</td>
<td></td>
</tr>
<tr>
<td>Senate</td>
<td></td>
</tr>
<tr>
<td>President</td>
<td></td>
</tr>
<tr>
<td>Disbursement For: 2018</td>
<td></td>
</tr>
<tr>
<td>Primary</td>
<td></td>
</tr>
<tr>
<td>General</td>
<td></td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
<tr>
<td>State: District:</td>
<td></td>
</tr>
<tr>
<td>Transaction ID: SB17.4535</td>
<td></td>
</tr>
<tr>
<td>Amount of Each Disbursement this Period</td>
<td></td>
</tr>
<tr>
<td>3300.00</td>
<td></td>
</tr>
<tr>
<td>Memo Item</td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL of Disbursements This Page (optional)**: 5589.00

**TOTAL This Period (last page this line number only)**: 5589.00
### A. Lee’s Auto Service
**Mailing Address**: 242 Harmon Industrial Park Rd

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tamuning</td>
<td>GU</td>
<td></td>
</tr>
</tbody>
</table>

**Purpose of Disbursement**
- Sign Damage Repair

**Candidate Name**

**Office Sought**: House
- **Disbursement For**: 2018
- **Category/Type**: General

**FEC Identification Number**

**Amount of Each Disbursement this Period**: 571.00

**Transaction ID**: SB17.4545

**Memo Item**
- Transaction ID : SB17.4545
- MoyCom
  - 242 Harmon Industrial Park Rd
  - Tamuning, GU
  - Sign Damage Repair
  - 2018

### B. MoyCom
**Mailing Address**: 424 West OBrien Dr Suite 107

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hagatna</td>
<td>GU</td>
<td></td>
</tr>
</tbody>
</table>

**Purpose of Disbursement**
- Radio Ad

**Candidate Name**

**Office Sought**: House
- **Disbursement For**: 2018
- **Category/Type**: General

**FEC Identification Number**

**Amount of Each Disbursement this Period**: 2000.00

**Transaction ID**: SB17.4501

**Memo Item**
- Transaction ID : SB17.4501
- MoyCom
  - 424 West OBrien Dr Suite 107
  - Hagatna, GU
  - Radio Ad
  - 2018

### C. Pacific Daily News
**Mailing Address**: 244 Archbishop FC Flores St

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hagatna</td>
<td>GU</td>
<td></td>
</tr>
</tbody>
</table>

**Purpose of Disbursement**
- Print Ad

**Candidate Name**

**Office Sought**: House
- **Disbursement For**: 2018
- **Category/Type**: General

**FEC Identification Number**

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

**Transaction ID**: SB17.4495

**Memo Item**
- Transaction ID : SB17.4495
- Pacific Daily News
  - 244 Archbishop FC Flores St
  - Hagatna, GU
  - Print Ad
  - 2018

---

**SUBTOTAL of Disbursements This Page (optional)**: 3771.00

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

MICHAEL SAN NICOLAS FOR CONGRESS

**A. Pacific Daily News**

<table>
<thead>
<tr>
<th>Name</th>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Date of Disbursement</th>
<th>Office Sought</th>
<th>Category/Type</th>
<th>Disbursement For:</th>
<th>Amount of Each Disbursement this Period</th>
<th>Transaction ID:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pacific Daily News</td>
<td>244 Archbishop FC Flores St</td>
<td></td>
<td>GU</td>
<td></td>
<td>10/30/2018</td>
<td>House</td>
<td>General</td>
<td>2018</td>
<td>4800.00</td>
<td>SB17.4525</td>
</tr>
</tbody>
</table>

**FEC Identification Number**

C

**B.**

<table>
<thead>
<tr>
<th>Name</th>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Date of Disbursement</th>
<th>Office Sought</th>
<th>Category/Type</th>
<th>Disbursement For:</th>
<th>Amount of Each Disbursement this Period</th>
<th>Transaction ID:</th>
</tr>
</thead>
</table>

**FEC Identification Number**

C

**C.**

<table>
<thead>
<tr>
<th>Name</th>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Date of Disbursement</th>
<th>Office Sought</th>
<th>Category/Type</th>
<th>Disbursement For:</th>
<th>Amount of Each Disbursement this Period</th>
<th>Transaction ID:</th>
</tr>
</thead>
</table>

**FEC Identification Number**

C

**SUBTOTAL** of Disbursements This Page (optional) ................................................................. 4800.00

**TOTAL** This Period (last page this line number only) .......................................................... 14160.00

**MEMO ITEM**

Transaction ID: SB17.4525
ITEMIZED DISBURSEMENTS

For Line Number: 19a 19b

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)
MICHAELE SAN NICOLAS FOR CONGRESS

| A. SAN NICOLAS, MICHAEL F.Q. MR., | | |
| Mailing Address 198 W. SANTA BARBARA AVE. | | |
| City | State | Zip Code |
| DEDEO | GU | 96929 |
| Purpose of Disbursement | Category/Type |
| | |
| Office Sought: | Disbursement For: 2018 |
| x House | x Primary |
| | | General |
| | | |
| State: GU District: 01 | |
| Date of Disbursement | |
| | M M / D D / Y Y Y Y |
| | 10 / 30 / 2018 |
| FEC Identification Number | C |
| H8GU01020 | |
| Amount of Each Disbursement this Period | 1451.07 |
| Transaction ID: SB19A.4528 | |
| Memo Item | |

| B. SAN NICOLAS, MICHAEL F.Q. MR., | | |
| Mailing Address 198 W. SANTA BARBARA AVE. | | |
| City | State | Zip Code |
| DEDEO | GU | 96929 |
| Purpose of Disbursement | Category/Type |
| | |
| Office Sought: | Disbursement For: 2018 |
| x House | x Primary |
| | | General |
| | | |
| State: GU District: 01 | |
| Date of Disbursement | |
| | M M / D D / Y Y Y Y |
| | 10 / 30 / 2018 |
| FEC Identification Number | C |
| H8GU01020 | |
| Amount of Each Disbursement this Period | 1503.79 |
| Transaction ID: SB19A.4529 | |
| Memo Item | |

| C. SAN NICOLAS, MICHAEL F.Q. MR., | | |
| Mailing Address 198 W. SANTA BARBARA AVE. | | |
| City | State | Zip Code |
| DEDEO | GU | 96929 |
| Purpose of Disbursement | Category/Type |
| | |
| Office Sought: | Disbursement For: 2018 |
| x House | x Primary |
| | | General |
| | | |
| State: GU District: 01 | |
| Date of Disbursement | |
| | M M / D D / Y Y Y Y |
| | 10 / 30 / 2018 |
| FEC Identification Number | C |
| H8GU01020 | |
| Amount of Each Disbursement this Period | 1545.22 |
| Transaction ID: SB19A.4531 | |
| Memo Item | |

SUBTOTAL of Disbursements This Page (optional) ........................................................................................................... ► 4500.08

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

MICHAEL SAN NICOLAS FOR CONGRESS

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Disbursement</th>
<th>Mailing Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. SAN NICOLAS, MICHAEL F.Q. MR., , ,</td>
<td>MM/DD/YYYY</td>
<td>198 W. SANTA BARBARA AVE.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Purpose of Disbursement</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Category/Type</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Office Sought:</th>
<th>Disbursement For: 2018</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>House</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Primary</td>
<td>Category/Type</td>
</tr>
<tr>
<td></td>
<td>General</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transaction ID:</th>
<th>SB19A.4532</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Memo Item</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Disbursement</th>
<th>Mailing Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. SAN NICOLAS, MICHAEL F.Q. MR., , ,</td>
<td>MM/DD/YYYY</td>
<td>198 W. SANTA BARBARA AVE.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Purpose of Disbursement</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Category/Type</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Office Sought:</th>
<th>Disbursement For: 2018</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>House</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Primary</td>
<td>Category/Type</td>
</tr>
<tr>
<td></td>
<td>General</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transaction ID:</th>
<th>SB19A.4547</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Memo Item</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Disbursement</th>
<th>Mailing Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>C. SAN NICOLAS, MICHAEL F.Q. MR., , ,</td>
<td>MM/DD/YYYY</td>
<td>198 W. SANTA BARBARA AVE.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Purpose of Disbursement</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Category/Type</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Office Sought:</th>
<th>Disbursement For: 2018</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>House</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Primary</td>
<td>Category/Type</td>
</tr>
<tr>
<td></td>
<td>General</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transaction ID:</th>
<th>SB19A.4548</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Memo Item</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL** of Disbursements This Page (optional) ........................................................................................................... ► 4340.41

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

<table>
<thead>
<tr>
<th>NAME OF COMMITTEE (In Full)</th>
<th>Michael San Nicolas For Congress</th>
</tr>
</thead>
</table>

#### A. Michael San Nicolas, Michael F.Q. Mr., , ,

- **Mailing Address**: 198 W. Santa Barbara Ave.
- **City**: DEDEDO
- **State**: GU
- **Zip Code**: 96929

<table>
<thead>
<tr>
<th>Date of Disbursement</th>
<th>11/05/2018</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Office Sought:</th>
<th>House</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senate</td>
<td></td>
</tr>
<tr>
<td>President</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State:</th>
<th>GU</th>
</tr>
</thead>
<tbody>
<tr>
<td>District:</td>
<td>01</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Purpose of Disbursement</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disbursement For:</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary</td>
<td></td>
</tr>
<tr>
<td>General</td>
<td></td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transaction ID:</th>
<th>SB19A.4549</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Amount of Each Disbursement this Period</th>
<th>1000.00</th>
</tr>
</thead>
</table>

#### B. Michael San Nicolas, Michael F.Q. Mr., , ,

- **Mailing Address**: 198 W. Santa Barbara Ave.
- **City**: DEDEDO
- **State**: GU
- **Zip Code**: 96929

<table>
<thead>
<tr>
<th>Date of Disbursement</th>
<th>11/09/2018</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Office Sought:</th>
<th>House</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senate</td>
<td></td>
</tr>
<tr>
<td>President</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State:</th>
<th>GU</th>
</tr>
</thead>
<tbody>
<tr>
<td>District:</td>
<td>01</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Purpose of Disbursement</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disbursement For:</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary</td>
<td></td>
</tr>
<tr>
<td>General</td>
<td></td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transaction ID:</th>
<th>SB19A.4550</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Amount of Each Disbursement this Period</th>
<th>269.00</th>
</tr>
</thead>
</table>

#### C. Michael San Nicolas, Michael F.Q. Mr., , ,

- **Mailing Address**: 198 W. Santa Barbara Ave.
- **City**: DEDEDO
- **State**: GU
- **Zip Code**: 96929

<table>
<thead>
<tr>
<th>Date of Disbursement</th>
<th>11/09/2018</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Office Sought:</th>
<th>House</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senate</td>
<td></td>
</tr>
<tr>
<td>President</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State:</th>
<th>GU</th>
</tr>
</thead>
<tbody>
<tr>
<td>District:</td>
<td>01</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Purpose of Disbursement</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disbursement For:</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary</td>
<td></td>
</tr>
<tr>
<td>General</td>
<td></td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transaction ID:</th>
<th>SB19A.4551</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Amount of Each Disbursement this Period</th>
<th>269.00</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>SUBTOTAL of Disbursements This Page (optional)</th>
<th>1538.00</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>TOTAL This Period (last page this line number only)</th>
<th></th>
</tr>
</thead>
</table>

---

FEC Identification Number: C H8GU01020

Memo Item: [SB19A.4549]

Memo Item: [SB19A.4550]

Memo Item: [SB19A.4551]

---

FEC Schedule B (Form 3) (Revised 05/2016)
### 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)**

MICHAEL SAN NICOLAS FOR CONGRESS

**Date of Disbursement**

- **A.** SAN NICOLAS, MICHAEL F.Q. MR.,
  
  Mailing Address 198 W. SANTA BARBARA AVE.

  City: DEDEDO
  
  State: GU
  
  Zip Code: 96929

  Disbursement For: 2018

  Office Sought: House

  State: GU

  District: 01

  Disbursement For: Primary

  Transaction ID: SB19A.4552

- **B.** SAN NICOLAS, MICHAEL F.Q. MR.,
  
  Mailing Address 198 W. SANTA BARBARA AVE.

  City: DEDEDO
  
  State: GU

  Zip Code: 96929

  Disbursement For: 2018

  Office Sought: House

  State: GU

  District: 01

  Disbursement For: Primary

  Transaction ID: SB19A.4553

- **C.** SAN NICOLAS, MICHAEL F.Q. MR.,
  
  Mailing Address 198 W. SANTA BARBARA AVE.

  City: DEDEDO

  State: GU

  Zip Code: 96929

  Disbursement For: 2018

  Office Sought: House

  State: GU

  District: 01

  Disbursement For: Primary

  Transaction ID: SB19A.4554

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

1226.07

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

<table>
<thead>
<tr>
<th>NAME OF COMMITTEE (In Full)</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MICHAEL SAN NICOLAS FOR CONGRESS</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### A. SAN NICOLAS, MICHAEL F.Q. MR., , ,

- **Mailing Address**: 198 W. SANTA BARBARA AVE.
- **City**: DEDEDO
- **State**: GU
- **Zip Code**: 96929

<table>
<thead>
<tr>
<th>Purpose of Disbursement</th>
<th>Category/Type</th>
<th>Disbursement For:</th>
<th>Amount of Each Disbursement this Period</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>2018 Primary</td>
<td>706.00</td>
</tr>
</tbody>
</table>

**Transaction ID**: SB19A.4555

### B. SAN NICOLAS, MICHAEL F.Q. MR., , ,

- **Mailing Address**: 198 W. SANTA BARBARA AVE.
- **City**: DEDEDO
- **State**: GU
- **Zip Code**: 96929

<table>
<thead>
<tr>
<th>Purpose of Disbursement</th>
<th>Category/Type</th>
<th>Disbursement For:</th>
<th>Amount of Each Disbursement this Period</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>2018 Primary</td>
<td>269.00</td>
</tr>
</tbody>
</table>

**Transaction ID**: SB19A.4556

### C. SAN NICOLAS, MICHAEL F.Q. MR., , ,

- **Mailing Address**: 198 W. SANTA BARBARA AVE.
- **City**: DEDEDO
- **State**: GU
- **Zip Code**: 96929

<table>
<thead>
<tr>
<th>Purpose of Disbursement</th>
<th>Category/Type</th>
<th>Disbursement For:</th>
<th>Amount of Each Disbursement this Period</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>2018 General</td>
<td>900.00</td>
</tr>
</tbody>
</table>

**Transaction ID**: SB19A.4557

### SUBTOTAL of Disbursements This Page (optional) .......................................................... 1875.00

### TOTAL This Period (last page this line number only) .......................................................... 1875.00
### NAME OF COMMITTEE (In Full)

**MICHAEL SAN NICOLAS FOR CONGRESS**

#### Section A

**Full Name (Last, First, Middle Initial):** SAN NICOLAS, MICHAEL F.Q. MR., , ,

**Mailing Address:** 198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Purpose of Disbursement:**

- **Office Sought:** x House
- **Disbursement For:** 2018
- **Category/Type:** General
- **FEC Identification Number:** H8GU01020
- **Amount of Each Disbursement this Period:** 669.45
- **Transaction ID:** SB19A.4558

#### Section B

**Full Name (Last, First, Middle Initial):** SAN NICOLAS, MICHAEL F.Q. MR., , ,

**Mailing Address:** 198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Purpose of Disbursement:**

- **Office Sought:** x Senate
- **Disbursement For:** 2018
- **Category/Type:** General
- **FEC Identification Number:** H8GU01020
- **Amount of Each Disbursement this Period:** 1226.86
- **Transaction ID:** SB19A.4559

#### Section C

**Full Name (Last, First, Middle Initial):** SAN NICOLAS, MICHAEL F.Q. MR., , ,

**Mailing Address:** 198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Purpose of Disbursement:**

- **Office Sought:** x House
- **Disbursement For:** 2018
- **Category/Type:** General
- **FEC Identification Number:** H8GU01020
- **Amount of Each Disbursement this Period:** 2046.00
- **Transaction ID:** SB19A.4561

**SUBTOTAL** of Disbursements This Page (optional): 3942.31

**TOTAL** This Period (last page this line number only): 3942.31
NAME OF COMMITTEE (In Full)

MICHAEL SAN NICOLAS FOR CONGRESS

A. SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address 198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

Purpose of Disbursement

<table>
<thead>
<tr>
<th>Office Sought:</th>
<th>House</th>
<th>Disbursement For: 2018</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
<td>Primary</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>General</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

State: GU District: 01

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C H8GU01020

Amount of Each Disbursement this Period

750.00

Transaction ID: SB19A.4562

Memo Item

B. SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address 198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

Purpose of Disbursement

<table>
<thead>
<tr>
<th>Office Sought:</th>
<th>House</th>
<th>Disbursement For: 2018</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
<td>Primary</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>General</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

State: GU District: 01

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C H8GU01020

Amount of Each Disbursement this Period

1668.62

Transaction ID: SB19A.4563

Memo Item

C.

Mailing Address

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

Purpose of Disbursement

<table>
<thead>
<tr>
<th>Office Sought:</th>
<th>House</th>
<th>Disbursement For: 2018</th>
<th>Category/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Primary</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>General</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional) 2418.62

TOTAL This Period (last page this line number only) 19840.49
**NAME OF COMMITTEE (In Full)**

**MICHAEL SAN NICOLAS FOR CONGRESS**

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

**SAN NICOLAS, MICHAEL F.Q. MR.,**

Mailing Address

198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**  \(269.00\)  

**Cumulative Payment To Date**  \(269.00\)  

**Balance Outstanding at Close of This Period**  \(0.00\)

**TERMS**

- **Date Incurred**  M M / D D / Y Y Y Y
- **Date Due**  M M / D D / Y Y Y Y
- **Interest Rate (If none, enter 0)**  % (apr)
- **Secured:** Yes \(\checkmark\) No

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

1. **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**
   - **State**
   - **ZIP Code**

2. **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**
   - **State**
   - **ZIP Code**

3. **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**
   - **State**
   - **ZIP Code**

4. **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**
   - **State**
   - **ZIP Code**

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

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

---

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
### Schedule C (FEC Form 3) Loans

**Name of Committee (In Full)**
MICHAEL SAN NICOLAS FOR CONGRESS

**Loan Source** Full Name (Last, First, Middle Initial)
SAN NICOLAS, MICHAEL F.Q. MR., , ,

- **Mailing Address**
  198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**
3000.00

**Cumulative Payment To Date**
3000.00

**Balance Outstanding at Close of This Period**
0.00

**Terms**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate (if none, enter 0)</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/03/2018</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

- **Memo Item**

- **Personal Funds of the Candidate**

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

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
<tr>
<td>Amount Guaranteed Outstanding:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
<tr>
<td>Amount Guaranteed Outstanding:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
<tr>
<td>Amount Guaranteed Outstanding:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
<tr>
<td>Amount Guaranteed Outstanding:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Subtotals This Period This Page (optional)**

**Totals This Period (last page in this line only)**

- **Balance Outstanding**: 0.00

---

*Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.*
<table>
<thead>
<tr>
<th>LOAN SOURCE</th>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Memo Item</th>
<th>Election:</th>
<th>Terms</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAN NICOLAS, MICHAEL F.Q. MR.,</td>
<td></td>
<td></td>
<td>2018</td>
<td>(check only one)</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>198 W. SANTA BARBARA AVE.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>DEDEDO</td>
<td>State</td>
<td>GU</td>
<td>ZIP Code</td>
</tr>
<tr>
<td>Original Amount of Loan</td>
<td>269.00</td>
<td>Cumulative Payment To Date</td>
<td>269.00</td>
<td>Balance Outstanding at Close of This Period</td>
</tr>
<tr>
<td>Date Incurred</td>
<td>Date Due</td>
<td>Interest Rate</td>
<td>Secured:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>(If none, enter 0)</td>
<td>% (apr)</td>
<td>Yes</td>
</tr>
<tr>
<td>1. Full Name (Last, First, Middle Initial)</td>
<td>Name of Employer</td>
<td>Occupation</td>
<td>Amount Guaranteed Outstanding:</td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Full Name (Last, First, Middle Initial)</td>
<td>Name of Employer</td>
<td>Occupation</td>
<td>Amount Guaranteed Outstanding:</td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Full Name (Last, First, Middle Initial)</td>
<td>Name of Employer</td>
<td>Occupation</td>
<td>Amount Guaranteed Outstanding:</td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Full Name (Last, First, Middle Initial)</td>
<td>Name of Employer</td>
<td>Occupation</td>
<td>Amount Guaranteed Outstanding:</td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTALS** This Period This Page (optional) .................................................................
**TOTALS** This Period (last page in this line only) .............................................................

*Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.*
### SCHEDULE C  (FEC Form 3)

#### LOANS

<table>
<thead>
<tr>
<th>Transaction ID : SC/10.4359</th>
</tr>
</thead>
</table>

**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

**LOAN SOURCE**

Full Name (Last, First, Middle Initial)

SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address

190 W. SANTA BARBARA AVE.

City | State | ZIP Code
--- | --- | ---
DEDEDO | GU | 96929

**Original Amount of Loan**

251.07

**Cumulative Payment To Date**

251.07

**Balance Outstanding at Close of This Period**

0.00

**TERMS**

Date Incurred

04/20/2018

Date Due

04/20/2018

Interest Rate (If none, enter 0)

% (apr)

Secured:

No

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

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

   Name of Employer

   Occupation

   Mailing Address

   City | State | ZIP Code
--- | --- | ---

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

   Name of Employer

   Occupation

   Mailing Address

   City | State | ZIP Code
--- | --- | ---

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

   Name of Employer

   Occupation

   Mailing Address

   City | State | ZIP Code
--- | --- | ---

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

   Name of Employer

   Occupation

   Mailing Address

   City | State | ZIP Code
--- | --- | ---

---

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

0.00

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

0.00

---

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

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

SAN NICOLAS, MICHAEL F.Q. MR.,

Mailing Address
198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**

1451.07

**Cumulative Payment To Date**

1451.07

**Balance Outstanding at Close of This Period**

0.00

**TERMS**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate (If none, enter 0)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M 04 Y 2018</td>
<td>M M D D YY Y Y</td>
<td>% (apr) Yes No</td>
</tr>
</tbody>
</table>

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

1. Full Name (Last, First, Middle Initial)

   Mailing Address

<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>

2. Full Name (Last, First, Middle Initial)

   Mailing Address

<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. Full Name (Last, First, Middle Initial)

   Mailing Address

<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>

4. Full Name (Last, First, Middle Initial)

   Mailing Address

<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>

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

0.00

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

0.00

**Memo Item**

☐

**Election:**

☐ Primary

☒ General

☐ Other (specify) ▼

☐ Personal Funds of the Candidate

**FEC Schedule C (Form 3) (Revised 05/2016)**
**SCHEDULE C  (FEC Form 3)**

**LOANS**

**NAME OF COMMITTEE (In Full)**
MICHAEL SAN NICOLAS FOR CONGRESS

<table>
<thead>
<tr>
<th>LOAN SOURCE</th>
<th>Full Name (Last, First, Middle Initial)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAN NICOLAS, MICHAEL F.Q. MR., , ,</td>
<td></td>
</tr>
</tbody>
</table>

**Mailing Address**
198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**
269.00

**Cumulative Payment To Date**
269.00

**Balance Outstanding at Close of This Period**
0.00

**TERMS**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate (If none, enter 0)</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>M / D / Y Y Y Y</td>
<td>M / D / Y Y Y Y</td>
<td>% (apr)</td>
<td>Yes</td>
</tr>
<tr>
<td>05/20/2018</td>
<td></td>
<td>0.00</td>
<td></td>
</tr>
</tbody>
</table>

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

1. **Full Name (Last, First, Middle Initial)**
   Name of Employer

   **Mailing Address**

<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>

   **Amount Guaranteed Outstanding:**

2. **Full Name (Last, First, Middle Initial)**
   Name of Employer

   **Mailing Address**

<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>

   **Amount Guaranteed Outstanding:**

3. **Full Name (Last, First, Middle Initial)**
   Name of Employer

   **Mailing Address**

<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>

   **Amount Guaranteed Outstanding:**

4. **Full Name (Last, First, Middle Initial)**
   Name of Employer

   **Mailing Address**

<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>

   **Amount Guaranteed Outstanding:**

**SUBTOTALS**
This Period This Page (optional)…………………………………………………………… 0.00

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**

**MICHAEL SAN NICOLAS FOR CONGRESS**

### LOAN SOURCE

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

**SAN NICOLAS, MICHAEL F.Q. MR., , ,**

**Mailing Address**

198 W. SANTA BARBARA AVE.

**City**

DEDEDO

**State**

GU

**ZIP Code**

96929

**Personal Funds of the Candidate**

- [ ]

**Election:**

- [ ] Primary
- [ ] General
- [x] Other (specify)

**TERMS**

- [ ]

**Date Incurred**

05/05/2018

**Date Due**

05/31/2018

**Interest Rate**

[ ]

**Secured:**

- [ ] Yes
- [x] No

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

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

   Name of Employer

   [ ]

   Mailing Address

   [ ]

   City

   [ ]

   State

   [ ]

   ZIP Code

   [ ]

   Amount Guaranteed Outstanding:

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

   Name of Employer

   [ ]

   Mailing Address

   [ ]

   City

   [ ]

   State

   [ ]

   ZIP Code

   [ ]

   Amount Guaranteed Outstanding:

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

   Name of Employer

   [ ]

   Mailing Address

   [ ]

   City

   [ ]

   State

   [ ]

   ZIP Code

   [ ]

   Amount Guaranteed Outstanding:

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

   Name of Employer

   [ ]

   Mailing Address

   [ ]

   City

   [ ]

   State

   [ ]

   ZIP Code

   [ ]

   Amount Guaranteed Outstanding:

**SUBTOTALS**

This Period This Page (optional)

0,00

**TOTALS**

This Period (last page in this line only)

0,00

---

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

---

**FEC Schedule C (Form 3) (Revised 05/2016)**
## SCHEDULE C  (FEC Form 3)

### LOANS

#### NAME OF COMMITTEE (In Full)

**MICHAEL SAN NICOLAS FOR CONGRESS**

#### LOAN SOURCE

**SAN NICOLAS, MICHAEL F.Q. MR., , ,**

- **Mailing Address:**
  198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

#### Terms

- **Date Incurred:** 06/05/2018
- **Date Due:**
- **Interest Rate:**
- **Secured:**

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

1. **Full Name (Last, First, Middle Initial):**
   - **Name of Employer:**
   - **Mailing Address:**
   - **City:**
   - **State:**
   - **ZIP Code:**

   | Amount Guaranteed Outstanding: |

2. **Full Name (Last, First, Middle Initial):**
   - **Name of Employer:**
   - **Mailing Address:**
   - **City:**
   - **State:**
   - **ZIP Code:**

   | Amount Guaranteed Outstanding: |

3. **Full Name (Last, First, Middle Initial):**
   - **Name of Employer:**
   - **Mailing Address:**
   - **City:**
   - **State:**
   - **ZIP Code:**

   | Amount Guaranteed Outstanding: |

4. **Full Name (Last, First, Middle Initial):**
   - **Name of Employer:**
   - **Mailing Address:**
   - **City:**
   - **State:**
   - **ZIP Code:**

   | Amount Guaranteed Outstanding: |

#### SUBTOTALS

- **This Period:** 0.00
- **This Page:**

#### TOTALS

- **This Period (last page in this line only):**

---

*Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.*
**SCHEDULE C  (FEC Form 3)**

**LOANS**

**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address  
198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Election:**  
Primary ☒  
General ☐  
Other (specify) ☐

**Original Amount of Loan**  
706.00

**Cumulative Payment To Date**  
706.00

**Balance Outstanding at Close of This Period**  
0.00

**Date Incurred**  
6/19/2018

**Date Due**  
6/19/2018

**Interest Rate** (If none, enter 0)  
% (apr) ☐  
Yes ☐  
No ☒

**Secured:**  
Yes ☐  
No ☒

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

1. Full Name (Last, First, Middle Initial)  
Mailing Address  
City  
State  
ZIP Code

2. Full Name (Last, First, Middle Initial)  
Mailing Address  
City  
State  
ZIP Code

3. Full Name (Last, First, Middle Initial)  
Mailing Address  
City  
State  
ZIP Code

4. Full Name (Last, First, Middle Initial)  
Mailing Address  
City  
State  
ZIP Code

**SUBTOTALS** This Period This Page (optional) .................................................................  
0.00

**TOTALS** This Period (last page in this line only) ..........................................................  
0.00

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

**Transaction ID : SC/10.4368**
**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

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

SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address

198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**TERMS**

Date Incurred: M 06 / D 19 / Y 2018

Date Due: M M / D D / Y Y Y Y

Interest Rate (If none, enter 0)

Secured:

Yes ☑

No ☐

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

<table>
<thead>
<tr>
<th>1. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ORIGINAL AMOUNT OF LOAN**

706.00

**CUMULATIVE PAYMENT TO DATE**

706.00

**BALANCE OUTSTANDING AT CLOSE OF THIS PERIOD**

0.00

**SUBTOTALS** This Period This Page (optional) .......................................................... 0.00

**TOTALS** This Period (last page in this line only) .................................................
**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

---

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

SAN NICOLAS, MICHAEL F.Q. MR., , ,

---

Mailing Address

198 W. SANTA BARBARA AVE.

**City**

DEDEDO

**State**

GU

**ZIP Code**

96929

---

**Original Amount of Loan**

269.00

---

**Cumulative Payment To Date**

269.00

---

**Balance Outstanding at Close of This Period**

0.00

---

**TERMS**

**Date Incurred**

M M / D D / Y Y Y Y

**Date Due**

M M / D D / Y Y Y Y

**Interest Rate** (If none, enter 0)

% (apr)

**Secured:**

Yes No

---

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

1. Full Name (Last, First, Middle Initial)

   Name of Employer

   Occupation

   Mailing Address

   City

   State

   ZIP Code

2. Full Name (Last, First, Middle Initial)

   Name of Employer

   Occupation

   Mailing Address

   City

   State

   ZIP Code

3. Full Name (Last, First, Middle Initial)

   Name of Employer

   Occupation

   Mailing Address

   City

   State

   ZIP Code

4. Full Name (Last, First, Middle Initial)

   Name of Employer

   Occupation

   Mailing Address

   City

   State

   ZIP Code

---

**SUBTOTALS** This Period This Page (optional)……………………………………………………………. 0.00

---

**TOTALS** This Period (last page in this line only)……………………………………………………………. 0.00

---

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

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

SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address

190 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Original Amount of Loan** 1900.00

**Cumulative Payment To Date** 1900.00

**Balance Outstanding at Close of This Period** 0.00

**TERMS**

Date Incurred 06/23/2018

Date Due 06/23/2018

Interest Rate (If none, enter 0) % (apr) No

**Secured:**

Yes No

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

1. Full Name (Last, First, Middle Initial) Name of Employer

   Mailing Address

   City

   State

   ZIP Code

   Name of Employer

   Occupation

   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

   Mailing Address

   City

   State

   ZIP Code

   Name of Employer

   Occupation

   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

   Mailing Address

   City

   State

   ZIP Code

   Name of Employer

   Occupation

   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

   Mailing Address

   City

   State

   ZIP Code

   Name of Employer

   Occupation

   Amount Guaranteed Outstanding:

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

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

---

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
# SCHEDULE C  (FEC Form 3)
## LOANS

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

## NAME OF COMMITTEE (In Full)
Michael San Nicolas for Congress

## LOAN SOURCE
Full Name (Last, First, Middle Initial)
Michael San Nicolas, Michael F.Q. Mr.,

Mailing Address
198 W. Santa Barbara Ave.

City
DeeDee
State
Gu
ZIP Code
96929

Original Amount of Loan
Cumulative Payment To Date
Balance Outstanding at Close of This Period
669.45
669.45
0.00

**TERMS**

- Date Incurred: 6/26/2018
- Date Due: 12/26/2018
- Interest Rate: 0.00 (apr)
- Secured: No

**Memo Item**
Personal Funds of the Candidate

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

1. Full Name (Last, First, Middle Initial)

   - Mailing Address
   - City
   - State
   - ZIP Code
   - Name of Employer
   - Occupation
   - Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

   - Mailing Address
   - City
   - State
   - ZIP Code
   - Name of Employer
   - Occupation
   - Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

   - Mailing Address
   - City
   - State
   - ZIP Code
   - Name of Employer
   - Occupation
   - Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

   - Mailing Address
   - City
   - State
   - ZIP Code
   - Name of Employer
   - Occupation
   - Amount Guaranteed Outstanding:

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

0.00

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

FEC Schedule C (Form 3) (Revised 05/2016)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

---

**LOAN SOURCE**

Full Name (Last, First, Middle Initial)

SAN NICOLAS, MICHAEL F.Q. MR., , ,

---

**Mailing Address**

198 W. SANTA BARBARA AVE.

---

**City**

DEDEDO

**State**

GU

**ZIP Code**

96929

---

**Original Amount of Loan**

1226.86

**Cumulative Payment To Date**

1226.86

**Balance Outstanding at Close of This Period**

0.00

---

**TERMS**

**Date Incurred**

06 / 28 / 2018

**Date Due**

---

**Interest Rate**

% (apr)

**Secured:**

No

---

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

1. Full Name (Last, First, Middle Initial)

   Name of Employer

   Occupation

   Mailing Address

   City

   State

   ZIP Code

---

2. Full Name (Last, First, Middle Initial)

   Name of Employer

   Occupation

   Mailing Address

   City

   State

   ZIP Code

---

3. Full Name (Last, First, Middle Initial)

   Name of Employer

   Occupation

   Mailing Address

   City

   State

   ZIP Code

---

4. Full Name (Last, First, Middle Initial)

   Name of Employer

   Occupation

   Mailing Address

   City

   State

   ZIP Code

---

**SUBTOTALS**

This Period This Page (optional)

0.00

---

**TOTALS**

This Period (last page in this line only)

---

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE** (In Full)  
MICHAEL SAN NICOLAS FOR CONGRESS

**Loan Source**  
Full Name (Last, First, Middle Initial)  
SAN NICOLAS, MICHAEL F.Q. MR., ea,  

Mailing Address  
198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**  
2046.00

**Cumulative Payment To Date**  
2046.00

**Balance Outstanding at Close of This Period**  
0.00

**Terms**  
Date Incurred: 06/28/2018  
Date Due:  
Interest Rate: 0% (apr)  
Secured: No

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

1. Full Name (Last, First, Middle Initial)  
Name of Employer  
Mailing Address  
City  
State  
ZIP Code  
Amount Guaranteed Outstanding:  

2. Full Name (Last, First, Middle Initial)  
Name of Employer  
Mailing Address  
City  
State  
ZIP Code  
Amount Guaranteed Outstanding:  

3. Full Name (Last, First, Middle Initial)  
Name of Employer  
Mailing Address  
City  
State  
ZIP Code  
Amount Guaranteed Outstanding:  

4. Full Name (Last, First, Middle Initial)  
Name of Employer  
Mailing Address  
City  
State  
ZIP Code  
Amount Guaranteed Outstanding:  

**Subtotals**  
This Period This Page (optional)  
0.00

**Totals**  
This Period (last page in this line only)  

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

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

SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address
198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**: 750.00

**Cumulative Payment To Date**: 750.00

**Balance Outstanding at Close of This Period**: 0.00

**TERMS**

- **Date Incurred**: 6/29/2018
- **Date Due**: 6/29/2018
- **Interest Rate (If none, enter 0)**: 0.00

**Secured**: No

**Election**: 2018

- Primary
- General
- Other (specify)

**Personal Funds of the Candidate**: Yes

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

1. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding

2. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding

3. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding

4. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding

**Subtotals**

This Period This Page (optional)

**TOTALS**

This Period (last page in this line only)

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

Mailing Address
198 W. SANTA BARBARA AVE.

City DEDEDO
State GU
ZIP Code 96929

Original Amount of Loan 1545.22
Cumulative Payment To Date 1545.22
Balance Outstanding at Close of This Period 0.00

Term: 06/30/2018

Name of Employer

Occasion

Amount Guaranteed Outstanding:

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

1. Full Name (Last, First, Middle Initial)
Mailing Address
City
State
ZIP Code

2. Full Name (Last, First, Middle Initial)
Mailing Address
City
State
ZIP Code

3. Full Name (Last, First, Middle Initial)
Mailing Address
City
State
ZIP Code

4. Full Name (Last, First, Middle Initial)
Mailing Address
City
State
ZIP Code

SUBTOTALS This Period This Page (optional)

TOTALS This Period (last page in this line only)

0.00
**NAME OF COMMITTEE (In Full)**

**MICHAEL SAN NICOLAS FOR CONGRESS**

<table>
<thead>
<tr>
<th>LOAN SOURCE</th>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Election:</th>
<th>Memo Item</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SAN NICOLAS, MICHAEL F.Q. MR., , ,</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Mailing Address
198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>1760.00</td>
<td>1668.62</td>
<td>91.38</td>
</tr>
</tbody>
</table>

**TERMS**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/05/2018</td>
<td></td>
<td>% (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)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding:

2. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding:

3. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding:

4. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding:

**SUBTOTALS**

This Period This Page (optional)
- 91.38

**TOTALS**

This Period (last page in this line only)
- 91.38

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

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

SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address

198 W. SANTA BARBARA AVE.

City DEDEDO

State GU

ZIP Code 96929

**TERMS**

Date Incurred: 07/26/2018

Date Due: 07/26/2018

Interest Rate: 0.0%

Secured: No

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

1. Full Name (Last, First, Middle Initial) SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address 198 W. SANTA BARBARA AVE.

City DEDEDO

State GU

ZIP Code 96929

Amount Guaranteed Outstanding: 269.00

2. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

<table>
<thead>
<tr>
<th>Amount Guaranteed Outstanding</th>
</tr>
</thead>
<tbody>
<tr>
<td>269.00</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Amount Guaranteed Outstanding</th>
</tr>
</thead>
<tbody>
<tr>
<td>269.00</td>
</tr>
</tbody>
</table>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**SCHEDULE C  (FEC Form 3)**

**LOANS**

**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address

198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**  
669.45

**Cumulative Payment To Date**  
0.00

**Balance Outstanding at Close of This Period**  
669.45

**TERMS**

- **Date Incurred**: M 08 / D 04 / Y 2018
- **Date Due**: M M / D D / Y Y Y Y
- **Interest Rate (If none, enter 0)**: 0 %
- **Secured**: No

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

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

   **Mailing Address**

   **Name of Employer**

   **Occupation**

   **City**
   **State**
   **ZIP Code**

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

   **Mailing Address**

   **Name of Employer**

   **Occupation**

   **City**
   **State**
   **ZIP Code**

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

   **Mailing Address**

   **Name of Employer**

   **Occupation**

   **City**
   **State**
   **ZIP Code**

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

   **Mailing Address**

   **Name of Employer**

   **Occupation**

   **City**
   **State**
   **ZIP Code**

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

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
## SCHEDULE C  (FEC Form 3)
### LOANS

**NAME OF COMMITTEE (In Full)**
MICHAEL SAN NICOLAS FOR CONGRESS

**LOAN SOURCE**  
Full Name (Last, First, Middle Initial)
SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address  
198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>3593.08</td>
<td>340.41</td>
<td>3252.67</td>
</tr>
</tbody>
</table>

**TERMS**  
Date Incurred: **08/05/2018**  
Date Due: **M M / D D / Y Y Y Y**  
Interest Rate (If none, enter 0): **% (apr)**  
Secured: **Yes ☑ No ☐**

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

1. **Full Name (Last, First, Middle Initial)**  
   **Occupation**  
   **Mailing Address**  
   **City**  
   **State**  
   **ZIP Code**

2. **Full Name (Last, First, Middle Initial)**  
   **Occupation**  
   **Mailing Address**  
   **City**  
   **State**  
   **ZIP Code**

3. **Full Name (Last, First, Middle Initial)**  
   **Occupation**  
   **Mailing Address**  
   **City**  
   **State**  
   **ZIP Code**

4. **Full Name (Last, First, Middle Initial)**  
   **Occupation**  
   **Mailing Address**  
   **City**  
   **State**  
   **ZIP Code**

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

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

---

*Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.*
**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

**LOAN SOURCE**

Full Name (Last, First, Middle Initial)

SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address

198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>269.00</td>
<td>0.00</td>
<td>269.00</td>
</tr>
</tbody>
</table>

**TERMS**

Date Incurred: 08/26/2018

Date Due: 

Interest Rate: 

Secured: Yes

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

<table>
<thead>
<tr>
<th>1. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Full Name (Last, First, Middle Initial)</th>
<th>Name of Employer</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Subtotals**

This Period This Page (optional) ........................................................... 269.00

**Totals**

This Period (last page in this line only) .................................................. 269.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**

MICHAEL SAN NICOLAS FOR CONGRESS

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address  
198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**  
990.00

**Cumulative Payment To Date**  
0.00

**Balance Outstanding at Close of This Period**  
990.00

**TERMS**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate (If none, enter 0)</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/ 15 / 2018</td>
<td></td>
<td>% (apr)</td>
<td>No</td>
</tr>
</tbody>
</table>

**Personal Funds of the Candidate**  
✓

**Memo Item**  
☐

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

---

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

1. Full Name (Last, First, Middle Initial)  
Name of Employer  
Mailing Address  
City  
State  
ZIP Code

2. Full Name (Last, First, Middle Initial)  
Name of Employer  
Mailing Address  
City  
State  
ZIP Code

3. Full Name (Last, First, Middle Initial)  
Name of Employer  
Mailing Address  
City  
State  
ZIP Code

4. Full Name (Last, First, Middle Initial)  
Name of Employer  
Mailing Address  
City  
State  
ZIP Code

---

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

---

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

---

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
NAME OF COMMITTEE (In Full)  
MICHAEL SAN NICOLAS FOR CONGRESS

<table>
<thead>
<tr>
<th>LOAN SOURCE</th>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Memo Item</th>
<th>Election:</th>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
<th>TERMS</th>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate (If none, enter 0)</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAN NICOLAS, MICHAEL F.Q. MR., , ,</td>
<td></td>
<td></td>
<td>General</td>
<td>09/25/2018</td>
<td>00/00</td>
<td>212.55</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
<td></td>
<td></td>
<td>198 W. SANTA BARBARA AVE.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td></td>
<td></td>
<td></td>
<td>DEDEDO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>State</td>
<td></td>
<td></td>
<td></td>
<td>GU</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ZIP Code</td>
<td></td>
<td></td>
<td></td>
<td>96929</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

1. Full Name (Last, First, Middle Initial)
   Name of Employer
   Mailing Address
   City | State | ZIP Code

2. Full Name (Last, First, Middle Initial)
   Name of Employer
   Mailing Address
   City | State | ZIP Code

3. Full Name (Last, First, Middle Initial)
   Name of Employer
   Mailing Address
   City | State | ZIP Code

4. Full Name (Last, First, Middle Initial)
   Name of Employer
   Mailing Address
   City | State | ZIP Code

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

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**SCHEDULE C  (FEC Form 3)**

**LOANS**

**NAME OF COMMITTEE (In Full)**
MICHAEL SAN NICOLAS FOR CONGRESS

<table>
<thead>
<tr>
<th>LOAN SOURCE</th>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Memo Item</th>
<th>Election:</th>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>SAN NICOLAS, MICHAEL F.Q. MR., , ,</td>
<td></td>
<td>2018</td>
<td>269.00</td>
<td>0.00</td>
<td>269.00</td>
</tr>
</tbody>
</table>

**TERMS**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>M 09 / D 26 / Y 2018</td>
<td>M M / D D / Y Y Y Y</td>
<td>% (apr)</td>
<td>Yes No</td>
</tr>
</tbody>
</table>

- **Memo Item:**
  - Personal Funds of the Candidate

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

1. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code
   - Amount Guaranteed Outstanding:

**SUBTOTALS**

This Period This Page (optional): 269.00

**TOTALS**

This Period (last page in this line only): 269.00

---

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**
**NAME OF COMMITTEE (In Full)**
MICHAEL SAN NICOLAS FOR CONGRESS

**LOAN SOURCE** Full Name (Last, First, Middle Initial)
SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address
198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**
384.00

**Cumulative Payment To Date**
0.00

**Balance Outstanding at Close of This Period**
384.00

**TERMS**
- **Date Incurred**: 09/28/2018
- **Date Due**: 
- **Interest Rate (if none, enter 0)**: % (apr)
- **Secured**: No

**Memo Item**

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

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

1. Full Name (Last, First, Middle Initial)
Mailing Address
City
State
ZIP Code

2. Full Name (Last, First, Middle Initial)
Mailing Address
City
State
ZIP Code

3. Full Name (Last, First, Middle Initial)
Mailing Address
City
State
ZIP Code

4. Full Name (Last, First, Middle Initial)
Mailing Address
City
State
ZIP Code

**SUBTOTALS**
This Period
This Page (optional)
384.00

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

*Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.*
### SCHEDULE C  (FEC Form 3)

#### LOANS

**NAME OF COMMITTEE (In Full)**
MICHAEL SAN NICOLAS FOR CONGRESS

**LOAN SOURCE**
SAN NICOLAS, MICHAEL F.Q. MR., , ,

**Mailing Address**
198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

**Original Amount of Loan**
4562.47

**Cumulative Payment To Date**
0.00

**Balance Outstanding at Close of This Period**
4562.47

**TERMS**
Date Incurred: 13/09/2018
Date Due: 13/09/2018

**Interest Rate**
Secured: 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
4562.47

**TOTALS**
This Period
4562.47

---

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
## SCHEDULE C (FEC Form 3)
### LOANS

**NAME OF COMMITTEE (In Full)**
MICHAEL SAN NICOLAS FOR CONGRESS

**LOAN SOURCE**
Full Name (Last, First, Middle Initial)
SAN NICOLAS, MICHAEL F.Q. MR., , ,

Mailing Address
198 W. SANTA BARBARA AVE.

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDEDO</td>
<td>GU</td>
<td>96929</td>
</tr>
</tbody>
</table>

- **Original Amount of Loan**: 2551.34
- **Cumulative Payment To Date**: 0.00
- **Balance Outstanding at Close of This Period**: 2551.34

**TERMS**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate (If none, enter 0)</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>M 10 / D 25 / Y 2018</td>
<td>M M / D D / Y Y Y Y</td>
<td>% (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)

   **Name of Employer**
   
   Mailing Address
   
<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>

2. Full Name (Last, First, Middle Initial)

   **Name of Employer**
   
   Mailing Address
   
<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. Full Name (Last, First, Middle Initial)

   **Name of Employer**
   
   Mailing Address
   
<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>

4. Full Name (Last, First, Middle Initial)

   **Name of Employer**
   
   Mailing Address
   
<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>

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

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
MICHAEL SAN NICOLAS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Guam SuperShopper
Mailing Address 167 Serenu Ave

City Tamuning State GU Zip Code 96913

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

Transaction ID : SD10.4446
Nature of Debt (Purpose):
Print Ad

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tri Vision Media Group
Mailing Address P.O. Box 8717

City Tamuning State GU Zip Code 96931

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

Transaction ID : SD10.4221
Nature of Debt (Purpose):
Digital Advertising

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

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

Transaction ID : SD10.4221
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) ▶