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FEC FORM 3

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Author	rized Committee	Offic	Office Use Only			
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5				
Bob Flores for Congre	ess 						
ADDRESS (number and street)	728 W. Edna Place						
Check if different than previously reported. (ACC)	Covina		CA 9172	22			
2. FEC IDENTIFICATION N	NUMBER ▼	CITY A	STATE A	ZIP CODE			
C C00518613	3.	IS THIS REPORT NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT CA 43			
4. TYPE OF REPORT (C (a) Quarterly Reports: April 15 Quarterly	(b)	12-Day PRE -Election Report for Primary (12P)	the: General (12G)	Runoff (12R)			
July 15 Quarterly		Convention (12C)	Special (12S)				
X October 15 Quart	erly Report (Q3)	Election on	D / Y Y Y	in the State of			
January 31 Year-E	End Report (YE) (c)		r the:				
		General (30G)	Runoff (30R)	Special (30S)			
Termination Repo	rt (TER)	Election on	D / Y " Y " Y " Y	in the State of			
5. Covering Period		Y Y Y 2014 through	M M / D D / Y 09 30	2014 Y			
I certify that I have examined a		est of my knowledge and belief i	t is true, correct and cor	mplete.			
	landa Miranda	[Electronically Filed]	Date 10	14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
NOTE: Submission of false, erro	neous, or incomplete info	rmation may subject the person sig	gning this Report to the pe	enalties of 2 U.S.C. §437g.			
Office Use Only				FEC FORM 3 (Revised 02/2003)			

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2/8

Write or Type Committee Name

Bob Flores for Congress

09 30 2014 01 2014 Report Covering the Period: From: To: **COLUMN B COLUMN A Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 0.00 4204.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 4204.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 0.00 3229.20 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 3229.20 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 974.40 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 11354.08 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts PAGE 3/8

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Bob Flores for Congress

07 01 2014 09 30 2014 Report Covering the Period: From: To: **COLUMN B COLUMN A** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 3300.00 (i) Itemized (use Schedule A)...... 0.00 904.00 (ii) Unitemized..... (iii) TOTAL of contributions 0.00 4204.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate TOTAL CONTRIBUTIONS (other than loans) 0.00 4204.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 0.00

	(b)	All Other Loans
14.	EXF	FSETS TO OPERATING PENDITURES funds, Rebates, etc.)
15.		HER RECEIPTS

Candidate.....

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

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4204.00								

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	3229.20
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
_0.	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.40
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	3229.60
	III. CASH SI	UMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	DRTING PERIOD	974.40
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		974.40
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	0.00
	CASH ON HAND AT CLOSE OF REPORTIN		974.40

(Use separate schedule(s) for each

PAGE FOR (ched

LINE NUMBER:		
ck only one)		9
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OF

numbered line) **Excluding Loans** NAME OF COMMITTEE (In Full) Bob Flores for Congress A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Credit card payment Bank of America Mailing Address P.O. Box 982235 Zip Code City El Paso TX 79998 **Transaction ID: PAYD42** Outstanding Balance Beginning This Period 90.05 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 90.05 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Filing fee **Robert Flores** Mailing Address 3924 W Avenue 42 Zip Code State 90065 Los Angeles CA Outstanding Balance Beginning This Period **Transaction ID: PAYD7** 1818.42 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1818.42 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Office supplies **Robert Flores** Mailing Address 3924 W Avenue 42 City State Zip Code CA Los Angeles 90065 Transaction ID: PAYD8 Outstanding Balance Beginning This Period 809.85 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 809 85 2718.32 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

(Use separate schedule(s) for each

PAGE **FOR**

LINE NUMBER:		
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OF

(chec numbered line) **Excluding Loans** NAME OF COMMITTEE (In Full) Bob Flores for Congress A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Printing letterhead and envelopes Robert Flores Mailing Address 3924 W Avenue 42 Zip Code City State Los Angeles CA 90065 Transaction ID: PAYD9 Outstanding Balance Beginning This Period 1891.16 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1891.16 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Payment to L.A. County **Robert Flores** Mailing Address 3924 W Avenue 42 Zip Code State Los Angeles CA 90065 Outstanding Balance Beginning This Period Transaction ID: PAYD11 250.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 250.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Credit card payments **Robert Flores** Mailing Address 3924 W Avenue 42 City State Zip Code CA Los Angeles 90065 Transaction ID: PAYD41 Outstanding Balance Beginning This Period 625.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 625 00 2766.16 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

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

Excluding Loans

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

PAGE 7 OF FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full) E

Bob Flores for Congres	SS					
A. Full Name (Last, First, Middle Initial) of Debto	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Doris Lau					
Mailing Address 417 N. Alhambra Ave., #B	Mailing Address 417 N. Alhambra Ave., #B					
City State Monterey	Zip Code CA	91755				
Outstanding Balance Beginning This Period 93.00			Transaction ID : PAYD25			
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period			
0.00	· · · · ·	0.00	93.00			
B. Full Name (Last, First, Middle Initial) of Debtor Doris Lau	or Creditor		Nature of Debt (Purpose): Postage			
Mailing Address 417 N. Alhambra Ave., #B						
City State Monterey	Zip Code CA	91755				
Outstanding Balance Beginning This Period			Transaction ID : PAYD26			
199.00						
Amount Incurred This Period 0.00	Pay	ment This Period 0.00	Outstanding Balance at Close of This Period			
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of Debt (Purpose): Copies			
Mailing Address 417 N. Alhambra Ave., #B						
City Monterey	State CA	Zip Code 91755				
Outstanding Balance Beginning This Period 28.14			Transaction ID : PAYD27			
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period			
0.00	,	0.00	28.14			
SUBTOTALS This Period This Page (optional)			320.14			
2) TOTALS This Period (last page this line number			-			
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page o	nly)	-			
4) ADD 2) and 3) and carry forward to appropriate	line of Summa	ary Page (last page only)				

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 8 OF
FOR LINE NUMBER:
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8

NAME OF COMMITTEE (In Full)

Bob Flores for Congress

Bob Flo	res for Congr	ess			
A. Full Name Doris La	(Last, First, Middle Initial) of De		Nature of Debt (Purpose): Postage		
Mailing Addres	SS 417 N. Alhambra Ave., #B				
City :	State	Zip Code CA	91755		
	Balance Beginning This Period				Transaction ID : PAYD28
	67.50	_			
Amo	unt Incurred This Period 0.00	Pay	ment This Period	0.00	Outstanding Balance at Close of This Period 67.50
	(Last, First, Middle Initial) of De eles County Registrar,				Nature of Debt (Purpose): Candidate Statement
City S	State	Zip Code CA			
	Balance Beginning This Period 4981.96 unt Incurred This Period 0.00		ment This Period	0.00	Transaction ID : PAYD10 Outstanding Balance at Close of This Period 4981.96
I	(Last, First, Middle Initial) of De Miranda & Associates				Nature of Debt (Purpose): Accounting and reporting services
Mailing Addres	728 W. Edna Place				
City Covina		State CA	Zip Code 91722		
Outstanding	Balance Beginning This Period 500.00				Transaction ID : PAYD43
Amo	unt Incurred This Period 0.00	Pay	ment This Period	0.00	Outstanding Balance at Close of This Period 500.00
1) SUBTOTALS	This Period This Page (optional	l)		>	5549.46
	Period (last page this line num		11354.08		
	STANDING LOANS from Sched 3) and carry forward to appropriate to				11354.08
., ADD 21 and	o, and dairy forward to appropr	iato inio di Guillili	ary rago (last page	Jiny)	