

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Steve Adams for Congress

ADDRESS (number and street)

4201 Brockton Ave Ste 100

Check if different than previously reported. (ACC)

Riverside

CA

92501

2. FEC IDENTIFICATION NUMBER ▼

C C00544882

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

CA

41

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

through

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

Type or Print Name of Treasurer Richard Teaman

Signature of Treasurer Richard Teaman

[Electronically Filed]

Date

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Steve Adams for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	25770.00	246418.99
(b) Total Contribution Refunds (from Line 20(d))	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	25770.00	245418.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	43150.03	223768.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	2677.26	3829.80
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	40472.77	219938.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	24191.42	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	43148.97	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Steve Adams for Congress

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="24950.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="820.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="25770.00"/>	<input type="text" value="225908.99"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="20500.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 36

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	10.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
25770.00	246418.99	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
2677.26	3829.80	120.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
8.18	242.79	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
28455.44	250491.58	120.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 36

Write or Type Committee Name

Steve Adams for Congress

 Report Covering the Period: From: / / To: / /
II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="43150.03"/>	<input type="text" value="223768.78"/>	<input type="text" value="1596.38"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="1000.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 36

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
-------------------------------	---	---

(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	1000.00	0.00
------	---------	------

21. OTHER DISBURSEMENTS

130.00	925.00	130.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

43280.03	225693.78	1726.38
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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))

25770.00	245418.99	0.00
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IV. NET OPERATING EXPENDITURES

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

40472.77	219938.98	1476.38
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	39016.01
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	28455.44
25. SUBTOTAL (add Line 23 and Line 24).....	67471.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	43280.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	24191.42

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
Ed Adkison

Mailing Address 2216 Monroe

City Riverside State CA Zip Code 92504

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

Name of Employer Adkan Engineers Occupation Land Surveyor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1220.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : 11AI-1736

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Melody J Alden

Mailing Address 2488 Grace St

City Riverside State CA Zip Code 92504

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

Name of Employer N/A Occupation housewife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : 11AI-1726

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Michael Butchko

Mailing Address 4810 Riverview Dr

City Riverside State CA Zip Code 92509

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

Name of Employer Michael Butchko & Associates Occupation veterinarian

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : 11AI-1733

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
Rodney Couch

Mailing Address 880 Eagle Crest

City Riverside State CA Zip Code 92506

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

Name of Employer PHI Occupation self employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : 11AI-1721

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
John L Ginger

Mailing Address 19 Shell Beach

City Newport Beach State CA Zip Code 92657

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

Name of Employer N/A Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : 11AI-1719

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
David Griffin

Mailing Address 1068 Elfstone Ct

City Thousand Oaks State CA Zip Code 91361

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

Name of Employer Griffin Real Estate Management Occupation Home Builder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 02 / 2014

Transaction ID : 11AI-1730

Amount of Each Receipt this Period
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
James L Halferty

Mailing Address 710 S San Rafael Ave

City Pasadena State CA Zip Code 91105

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

Name of Employer Halferty Development Company Occupation Business owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : 11AI-1739

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
J T Hanks

Mailing Address 3545 Beechwood Pl

City Riverside State CA Zip Code 92506

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

Name of Employer State of California Occupation retired judge

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **975.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : 11AI-1703

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Scott Hildebrandt

Mailing Address 20683 Golden Rain Rd

City Riverside State CA Zip Code 92508

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

Name of Employer Albert A. Webb Associates Occupation Civil Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : 11AI-1696

Amount of Each Receipt this Period
500.00

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
Rhonda Jacobs

Mailing Address 4949 La Sierra Ave

City Riverside State CA Zip Code 92505

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

Name of Employer Access Brokerage Corp. Occupation Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : 11AI-1723

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Andrew Jorgenson

Mailing Address 7519 River Glen Dr

City Riverside State CA Zip Code 92509

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

Name of Employer OmniPlatform Corporaton Occupation President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : 11AI-1720

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Reggie King

Mailing Address 10407 Trademark St

City Rancho Cucamonga State CA Zip Code 91730

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

Name of Employer Young Homes Occupation business owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : 11AI-1725

Amount of Each Receipt this Period
2600.00

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

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

4100.00

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

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

FOR LINE NUMBER: PAGE 11 OF 36
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
Jerry Lobb

Mailing Address 32938 Avenida Lestonnac

City State Zip Code
Temecula CA 92592

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

Name of Employer Occupation
Lobb & Cliff LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 28 2014

Transaction ID : 11AI-1716

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
JAMES MANNING

Mailing Address 28711 Via Pasatiempo

City State Zip Code
Laguna Beach CA 92677

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

Name of Employer Occupation
REID & HELLYER LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 28 2014

Transaction ID : 11AI-1717

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
DENNIS E MORGAN

Mailing Address 1321 Matterhorn Dr

City State Zip Code
Riverside CA 92506

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

Name of Employer Occupation
IPA Company business owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 31 2014

Transaction ID : 11AI-1731

Amount of Each Receipt this Period
250.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Mangione

Mailing Address 7163 Mirale Mile

City Riverside State CA Zip Code 92506

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

Name of Employer McManga Foods Inc. Occupation restaurateur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : 11AI-1712

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ed Ploner

Mailing Address 5654 Norwood Ave

City Riverside State CA Zip Code 92505

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

Name of Employer Ed Ploner Enterprises Occupation business owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : 11AI-1738-I

Amount of Each Receipt this Period
250.00

Earmarked through Ed Ploner Enterprises. Date received by conduit in memo record below.

C. Full Name (Last, First, Middle Initial)
Ed Ploner Enterprises

Mailing Address 5654 Norwood Ave

City Riverside State CA Zip Code 92505

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : 11AI-1738-I-MEMO

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Total earmarked through conduit, PAC limits not affected.

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
DUANE ROBERTS

Mailing Address 4100 NEWPORT PL STE 400

City State Zip Code
NEWPORT BEACH CA 92660

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

Name of Employer Occupation
ENTREPRENEURIAL CAPITAL CORP. CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : 11AI-1706

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Elaine M Raahauge

Mailing Address 1343 Catherine Cir

City State Zip Code
Corona CA 92880

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

Name of Employer Occupation
Mike Raahauge's Shooting Range business owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : 11AI-1735

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Richard B Reed

Mailing Address 5515 Malvern Way

City State Zip Code
Riverside CA 92506

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : 11AI-1700

Amount of Each Receipt this Period
150.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
Richard B Reed

Mailing Address 5515 Malvern Way

City Riverside State CA Zip Code 92506

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : 11AI-1701

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Kelly Roberts

Mailing Address 4100 Newport PI Ste 400

City Newport Beach State CA Zip Code 92660

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

Name of Employer Historic Mission Inn Corp. Occupation Vice Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : 11AI-1707

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Carl E Rowe

Mailing Address 11751 Davis St

City Sun City State CA Zip Code 92587-6316

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

Name of Employer Integrated Health Care Occupation owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : 11AI-1732

Amount of Each Receipt this Period
500.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
Mark Rubin

Mailing Address 9201 Wilshire Blvd Ste 103

City State Zip Code
Beverly Hills CA 90210

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

Name of Employer Occupation
Mission Village Shopping Center L.P. owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2625.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : 11AI-1709

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Pam Rubin

Mailing Address 9201 Wilshire Blvd # 103

City State Zip Code
Beverly Hills CA 90210

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

Name of Employer Occupation
N/A housewife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : 11AI-1710

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Dana M Smith

Mailing Address 6063 Bannock Dr

City State Zip Code
Riverside CA 92507

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

Name of Employer Occupation
Smith Law Offices attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : 11AI-1734

Amount of Each Receipt this Period
250.00

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

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

5250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
Thomas R Spiel

Mailing Address 3353 Durahart

City Riverside State CA Zip Code 92507

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

Name of Employer McSpi Inc. Occupation Restaurant owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : 11AI-1722

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Todd Zervas

Mailing Address 5261 Sierra Vista Ave

City Riverside State CA Zip Code 92505

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

Name of Employer Boeing Occupation Aerospace Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : 11AI-1713

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
INDIANA AVE PROPERTIES

Mailing Address 7095 Indiana Ave Ste 100

City RIVERSIDE State CA Zip Code 92506

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : 11AI-1787-P

Amount of Each Receipt this Period
500.00

See attribution below.

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
A. C Nejedly

Mailing Address 7095 Indiana Ave Ste 100

City Riverside State CA Zip Code 92506

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

Name of Employer 3N Realty & Dev. Inc. Occupation Realtor/Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : 11AI-1727-PA

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Partnership Attribution

B. Full Name (Last, First, Middle Initial)
Shirley Nejedly

Mailing Address 7095 Indiana Ave Ste 100

City Riverside State CA Zip Code 92506

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

Name of Employer Indians Ave. Properties Occupation partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : 11AI-1728-PA

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Partnership Attribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

24950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 36
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
Pete Esquivel Political Consulting

Mailing Address 7984 Palm View Lane

City Riverside State CA Zip Code 92508

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : 14-1724

Amount of Each Receipt this Period
2500.00
voided check - lost in mail

B. Full Name (Last, First, Middle Initial)
Piryx Inc.

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : 14-1741

Amount of Each Receipt this Period
56.86
overcharge fee adjustment

C. Full Name (Last, First, Middle Initial)
RedRock Strategies, Inc.

Mailing Address 9500 W. Flamingo Rd. #203

City Las Vegas State NV Zip Code 89147

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : 14-1742

Amount of Each Receipt this Period
0.40
overcharge fee adjustment

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

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

2557.26

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 36
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
The Livingston Group

Mailing Address 4000 Pierce St.

City Riverside State CA Zip Code 92505

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 20 / 2014

Transaction ID : 14-1743

Amount of Each Receipt this Period
120.00
 void check - wrong payee

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

120.00

2677.26

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 36
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. Full Name (Last, First, Middle Initial)
PROVIDENT BANK

Mailing Address 3756 CENTRAL AVE.

City RIVERSIDE State CA Zip Code 92506

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
242.79

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : 15-1799-O

Amount of Each Receipt this Period
8.18
interest

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

8.18

8.18

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. Citrus City Grille		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014
Mailing Address 2765 Lakeshore Dr.		Amount of Each Disbursement this Period 290.78
City Corona	State CA	
Zip Code 92883	Purpose of Disbursement dinner for volunteers	Transaction ID : 17-1116-S
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] SUBVENDOR to STEVE ADAMS
State: District:		

Full Name (Last, First, Middle Initial) B. Total Wine & More		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2014
Mailing Address 8201 Day Creek Blvd.		Amount of Each Disbursement this Period 389.38
City Etiwanda	State CA	
Zip Code 91739	Purpose of Disbursement beverages for volunteer thank you party	Transaction ID : 17-1117-S
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] SUBVENDOR to STEVE ADAMS
State: District:		

Full Name (Last, First, Middle Initial) C. STEVE ADAMS		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 90.26
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-Olivia's Restaurant -breakfast 11/1 for volunteers	Transaction ID : 17-1109
Candidate Name STEVE ADAMS	001 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 41		

SUBTOTAL of Disbursements This Page (optional).....	90.26
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. STEVE ADAMS		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 158.76 Transaction ID : 17-1110
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-Ruth Chris' Steak House-dinner 11/3 w/volunteer/constituent	Category/ Type 001
Candidate Name STEVE ADAMS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 41	

Full Name (Last, First, Middle Initial) B. STEVE ADAMS		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 290.78 Transaction ID : 17-1111
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-Citrus City Grille-dinner 11/5 for volunteers	Category/ Type 001
Candidate Name STEVE ADAMS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 41	

Full Name (Last, First, Middle Initial) C. STEVE ADAMS		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 158.08 Transaction ID : 17-1112
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-David S. Gift & Tobacco-gifts for volunteers	Category/ Type 001
Candidate Name STEVE ADAMS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 41	

SUBTOTAL of Disbursements This Page (optional).....	607.62
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. STEVE ADAMS		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 141.60 Transaction ID : 17-1113
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-Stater Bros-food for volunteer thank you party	Category/ Type 001
Candidate Name STEVE ADAMS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 41	

Full Name (Last, First, Middle Initial) B. STEVE ADAMS		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 389.38 Transaction ID : 17-1114
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-Total Wine & More-beverages for volunteer thank you party	Category/ Type 001
Candidate Name STEVE ADAMS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 41	

Full Name (Last, First, Middle Initial) C. STEVE ADAMS		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 5354 College Ave		Amount of Each Disbursement this Period 47.52 Transaction ID : 17-1115
City Riverside	State CA	
Zip Code 92505	Purpose of Disbursement reimburse-Brighton-gift for volunteer	Category/ Type 001
Candidate Name STEVE ADAMS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 41	

SUBTOTAL of Disbursements This Page (optional).....	578.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

A. COGS SOUTH SIGNS

Full Name (Last, First, Middle Initial)
Mailing Address 3309 S MAIN ST

City SANTA ANA State CA Zip Code 92707

Purpose of Disbursement signs

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 03 / 2014

Amount of Each Disbursement this Period: 1207.40

Transaction ID : 17-1094

Category/Type: 006

B. Data Dog

Full Name (Last, First, Middle Initial)
Mailing Address 3411A Arlington Ave.

City Riverside State CA Zip Code 92506

Purpose of Disbursement labels - 10/29 event

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 21 / 2014

Amount of Each Disbursement this Period: 250.00

Transaction ID : 17-1078

Category/Type: 003

C. Desmond & Louis Inc.

Full Name (Last, First, Middle Initial)
Mailing Address 12829 Yucaipa Creek Place

City Yucaipa State CA Zip Code 92399

Purpose of Disbursement public affairs services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 30 / 2014

Amount of Each Disbursement this Period: 4000.00

Transaction ID : 17-1089

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 5457.40

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. Kennedy Marketing Group Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 416 Camino Bandera			Amount of Each Disbursement this Period 19971.90 Transaction ID : 17-1080
City San Clemente	State CA	Zip Code 92673	
Purpose of Disbursement postcards	Category/Type 004		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Michael Williams Company			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 3711- A Arlington Ave.			Amount of Each Disbursement this Period 100.00 Transaction ID : 17-1097
City Riverside	State CA	Zip Code 92506	
Purpose of Disbursement template	Category/Type 001		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Michael Williams Company			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 3711- A Arlington Ave.			Amount of Each Disbursement this Period 3109.20 Transaction ID : 17-1098
City Riverside	State CA	Zip Code 92506	
Purpose of Disbursement commission for fundraising	Category/Type 003		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	23181.10
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. Michael Williams Company			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014	
Mailing Address 3711- A Arlington Ave.			Amount of Each Disbursement this Period 1000.00	
City Riverside	State CA	Zip Code 92506	Transaction ID : 17-1099	
Purpose of Disbursement monthly retainer		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Michael Williams Company			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014	
Mailing Address 3711- A Arlington Ave.			Amount of Each Disbursement this Period 72.83	
City Riverside	State CA	Zip Code 92506	Transaction ID : 17-1100	
Purpose of Disbursement reimburse-Vertical Response - e-mail blasts		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Pete Esquivel Political Consulting			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 7984 Palm View Lane			Amount of Each Disbursement this Period 2500.00	
City Riverside	State CA	Zip Code 92508	Transaction ID : 17-1091	
Purpose of Disbursement administrative & campaign consulting		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3572.83
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 36		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75 Transaction ID : 17-1073
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement fees & charges	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 0.58 Transaction ID : 17-1074
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement fees & charges	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75 Transaction ID : 17-1075
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement fees & charges	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	35.08
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 10.64 Transaction ID : 17-1076
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement fees & charges	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 287.50 Transaction ID : 17-1081
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement fees & charges	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 17.26 Transaction ID : 17-1082
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement fees & charges	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	315.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105		Transaction ID : 17-1083
Purpose of Disbursement fees & charges	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105		Transaction ID : 17-1084
Purpose of Disbursement fees & charges	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 158.13
City San Francisco	State CA	
Zip Code 94105		Transaction ID : 17-1085
Purpose of Disbursement fees & charges	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	175.39
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 36			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 29.00 Transaction ID : 17-1086
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement charge back management process	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 58.94 Transaction ID : 17-1087
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement fees & charges	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 86.25 Transaction ID : 17-1090
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement fees & charges	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	174.19
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 36			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement fees & charges	Transaction ID : 17-1092
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement fees & charges	Transaction ID : 17-1093
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Printing Connection Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 11800 Sterling Ave. Ste. #E		Amount of Each Disbursement this Period 1181.03
City Riverside	State CA	
Zip Code 92503	Purpose of Disbursement brochure & envelopes	Transaction ID : 17-1077
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1215.03
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. Teaman, Ramirez & Smith Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 4201 Brockton Ave. Ste. 100		Amount of Each Disbursement this Period 1728.97
City Riverside	State CA	
Zip Code 92501	Purpose of Disbursement October campaign reporting services	Transaction ID : 17-1101
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Strategy Group Company		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 671.68
City Delaware	State OH	
Zip Code 43015	Purpose of Disbursement automated calls	Transaction ID : 17-1079
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Strategy Group Company		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 562.28
City Delaware	State OH	
Zip Code 43015	Purpose of Disbursement automated calls	Transaction ID : 17-1088
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2962.93
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. The Strategy Group Company			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 7669 Stagers Loop			Amount of Each Disbursement this Period 562.28	
City Delaware	State OH	Zip Code 43015	Transaction ID : 17-1102	
Purpose of Disbursement Automated Calls		004 Category/ Type		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. The Strategy Group Company			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 7669 Stagers Loop			Amount of Each Disbursement this Period 562.04	
City Delaware	State OH	Zip Code 43015	Transaction ID : 17-1103	
Purpose of Disbursement Automated Calls		004 Category/ Type		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) c. The Strategy Group Company			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 7669 Stagers Loop			Amount of Each Disbursement this Period 562.28	
City Delaware	State OH	Zip Code 43015	Transaction ID : 17-1104	
Purpose of Disbursement Automated Calls		004 Category/ Type		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	1686.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 36	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. MIKE WILLIAMS		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 3711-A ARLINGTON AVE.		Amount of Each Disbursement this Period 2777.20 Transaction ID : 17-1095
City RIVERSIDE State CA Zip Code 92506	Purpose of Disbursement reimburse-Mission Inn- 10/29 event	
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2777.20
TOTAL This Period (last page this line number only).....	42830.03

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 36	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Steve Adams for Congress

Full Name (Last, First, Middle Initial) A. 452 AMW Military Ball		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 2145 Graeber St. Bldg 470		Amount of Each Disbursement this Period 130.00
City State Zip Code March Air Force Base CA 92518	Purpose of Disbursement Annual Military Ball	
Candidate Name	012 Category/ Type	Transaction ID : 21-1106
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	130.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 36 OF 36
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Steve Adams for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor RedRock Strategies, Inc.		Nature of Debt (Purpose): general consulting fees & expenses
Mailing Address 9500 W. Flamingo Rd. #203		
City State Zip Code Las Vegas NV 89147		

Outstanding Balance Beginning This Period <input type="text" value="37125.71"/>		Transaction ID : D10-650-V	
Amount Incurred This Period <input type="text" value="6023.26"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="43148.97"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="43148.97"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="43148.97"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="43148.97"/>