

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
ATLAS PAC, FEDERAL

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 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)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 DAVID BAUER

Signature of Treasurer DAVID BAUER [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name  
**ATLAS PAC, FEDERAL**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="804.67"/>	<input type="text" value="804.67"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="315.47"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="4100.00"/>	<input type="text" value="8600.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="4415.47"/>	<input type="text" value="9404.67"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="323.25"/>	<input type="text" value="5316.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4092.22"/>	<input type="text" value="4092.22"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="4581.14"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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

Write or Type Committee Name  
**ATLAS PAC, FEDERAL**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4100.00	8500.00
(ii) Unitemized .....	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4100.00	8600.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	4100.00	8600.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	4100.00	8600.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4100.00	8600.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	323.25	4316.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	323.25	4316.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	323.25	5316.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	323.25	5316.20

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4100.00	8600.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4100.00	8600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	323.25	4316.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	323.25	4316.20

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

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

FOR LINE NUMBER: PAGE 6 OF 10  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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)  
**ATLAS PAC, FEDERAL**

**A. JEFF MATHEWS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2053 TUSTIN AVE. #C  
 City State Zip Code  
 Costa Mesa CA 92627  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ARDEN LP OWNER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2014  
**Transaction ID : INCA516**  
 Amount of Each Receipt this Period  
 100.00

**B. Steel, Shawn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27520 Hawthorne Bl  
 270  
 City State Zip Code  
 Rolling Hills Esta CA 90274  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 self attorney  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 20 / 2014  
**Transaction ID : INCA523**  
 Amount of Each Receipt this Period  
 4000.00

**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) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4100.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**ATLAS PAC, FEDERAL**

Full Name (Last, First, Middle Initial)

**A. COMPLETE CAMPAIGNS**

Mailing Address 610 GATEWAY CENTER WAY #K

City SAN DIEGO State CA Zip Code 92102

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 16 / 2014

Transaction ID : EXPB513

Amount of Each Disbursement this Period

3.75

Full Name (Last, First, Middle Initial)

**B. COMPLETE CAMPAIGNS**

Mailing Address 610 GATEWAY CENTER WAY #K

City SAN DIEGO State CA Zip Code 92102

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 23 / 2014

Transaction ID : EXPB517

Amount of Each Disbursement this Period

7.50

Full Name (Last, First, Middle Initial)

**C. COMPLETE CAMPAIGNS**

Mailing Address 610 GATEWAY CENTER WAY #K

City SAN DIEGO State CA Zip Code 92102

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 24 / 2014

Transaction ID : EXPB524

Amount of Each Disbursement this Period

300.00

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

311.25

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

311.25

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **ATLAS PAC, FEDERAL** Transaction ID : **PAYC7**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) LEE LOWREY	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P. O. BOX 7331 2320 THIRD AVE.	
City NEWPORT BEACH State CA ZIP Code 92658	

Original Amount of Loan <input type="text" value="4000.00"/>	Cumulative Payment To Date <input type="text" value="3000.00"/>	Balance Outstanding at Close of This Period <input type="text" value="1000.00"/>
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**TERMS**

Date Incurred MM / DD / YYYY 11 / 07 / 2006	Date Due MM / DD / YYYY 06 / 30 / 2007	Interest Rate <input type="text" value="0.00"/> % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1000.00"/>
<b>TOTALS</b> This Period (last page in this line only)..... ▶	<input type="text" value="1000.00"/>

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 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

NAME OF COMMITTEE (In Full)  
**ATLAS PAC, FEDERAL**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BIEBER COMMUNICATIONS</b>	Nature of Debt (Purpose): MASS MAIL OPPOSING AMI BERA
Mailing Address 3609 W. MACARTHUR BLVD. #812	
City State Zip Code SANTA ANA CA 92704	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : PAYD520</b>	
Amount Incurred This Period <input type="text" value="3581.14"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3581.14"/>

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"/>	Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of 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"/>	Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
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1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3581.14"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="3581.14"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="1000.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="4581.14"/>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>ATLAS PAC, FEDERAL</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00425645
--	--

Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>BIEBER COMMUNICATIONS</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2014	
Mailing Address 3609 W. MACARTHUR BLVD. #812		Amount <span style="border: 1px solid black; padding: 2px;">3581.14</span>	
City SANTA ANA	State CA	Zip Code 92704	<b>Transaction ID : PDTE35</b>
Purpose of Expenditure MASS MAIL OPPOSING AMI BERA	Category/Type <span style="border: 1px solid black; padding: 2px;">24A</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2014	
Name of Federal Candidate AMI BERA		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3581.14</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Mailing Address		Amount <span style="border: 1px solid black; padding: 2px;"></span>	
City	State	Zip Code	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Purpose of Expenditure	Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Name of Federal Candidate	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*DAVID BAUER*

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
11 / 29 / 2014