

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

Jack Orswell for Congress

ADDRESS (number and street)

888 S. Figueroa St., Suite 860

Check if different than previously reported. (ACC)

Los Angeles

CA

90017

2. FEC IDENTIFICATION NUMBER ▼

C C00513838

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

27

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

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

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 William R. Turner

Signature of Treasurer William R. Turner

[Electronically Filed]

Date

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
Jack Orswell 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))....	13035.00	67507.33
(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)).....	13035.00	66507.33
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	12854.90	57620.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	12854.90	57620.52
8. Cash on Hand at Close of Reporting Period (from Line 27).....	28531.81	
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).....	25269.58	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Jack Orswell for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11950.00	63917.00
(ii) Unitemized.....	1085.00	1085.00
(iii) TOTAL of contributions from individuals ▶	13035.00	65002.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	2505.33
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	13035.00	67507.33
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	20000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	20000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	13035.00	87507.33

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12854.90	57620.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1000.00
21. OTHER DISBURSEMENTS	0.00	355.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	12854.90	58975.52

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	28351.71
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13035.00
25. SUBTOTAL (add Line 23 and Line 24).....	41386.71
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12854.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	28531.81

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 26
	<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)
Jack Orswell for Congress

A. Full Name (Last, First, Middle Initial)
Jeannette Leslie

Mailing Address 1023 S. 5th Ave.

City Arcadia State CA Zip Code 91006

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2013
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2012

Transaction ID : INCA212

Amount of Each Receipt this Period
 200.00

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

Mailing Address 32 Corto Road

City Arcadia State CA Zip Code 91007

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2012

Transaction ID : INCA216

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Eugene R. Casafrande

Mailing Address 1047 E. Rodda River Place

City Tucson State AZ Zip Code 85718

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2012

Transaction ID : INCA219

Amount of Each Receipt this Period
 200.00

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

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

650.00

**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 6 OF 26
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Richard L Clark		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2012	
Mailing Address 3662 York Circle		Transaction ID : INCA229	
City La Verne	State CA	Zip Code 91750	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer LA Co. Fire Dept.	Occupation Deputy Health Officer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00		

Full Name (Last, First, Middle Initial) B. Richard L Clark		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2012	
Mailing Address 3662 York Circle		Transaction ID : INCA230	
City La Verne	State CA	Zip Code 91750	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer LA Co. Fire Dept.	Occupation Deputy Health Officer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00		

Full Name (Last, First, Middle Initial) C. Sanjeet Nijjar		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2012	
Mailing Address 29 Starlite Drive		Transaction ID : INCA228	
City Bradbury	State CA	Zip Code 91008	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self	Occupation Real Estate Mgmt		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 26
	<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)
Jack Orswell for Congress

A. Full Name (Last, First, Middle Initial)
James R. Orswell

Mailing Address 1161 Volante Drive

City Arcadia State CA Zip Code 91007

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

Name of Employer OKI Occupation RRA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 01 / 2012

Transaction ID : INCA239

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Carol G. Andreen

Mailing Address 965 Hugo Reid Drive

City Arcadia State CA Zip Code 91007

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

Name of Employer Arcadia School District Occupation Teacher

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 16 / 2012

Transaction ID : INCA249

Amount of Each Receipt this Period
500.00

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

Mailing Address 1420 Santo Domingo Ave.

City Duarte State CA Zip Code 91010

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 16 / 2012

Transaction ID : INCA251

Amount of Each Receipt this Period
2500.00

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

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

3100.00

**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 26
	<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)
Jack Orswell for Congress

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

Mailing Address 1420 Santo Domingo Ave.

City Duarte State CA Zip Code 91010

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2012

Transaction ID : INCA252

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Martha C. Woods

Mailing Address 925 E. Villa St., Unit 207

City Pasadena State CA Zip Code 91106

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2012

Transaction ID : INCA250

Amount of Each Receipt this Period
2500.00

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

Mailing Address 1044 Singingwood

City Arcadia State CA Zip Code 91006

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2012

Transaction ID : INCA254

Amount of Each Receipt this Period
2000.00

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

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

7000.00

11950.00

**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 26
	<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)
Jack Orswell for Congress

A. Full Name (Last, First, Middle Initial)
John E Orswell

Mailing Address 1161 Volante Dr.

City Arcadia State CA Zip Code 91007

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

Name of Employer Orserll & Kasman, Inc. Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
22952.66

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : PAYA276

Amount of Each Receipt this Period
200.91

Local travel to be reimbursed

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
John E Orswell

Mailing Address 1161 Volante Dr.

City Arcadia State CA Zip Code 91007

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

Name of Employer Orserll & Kasman, Inc. Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
22952.66

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2012

Transaction ID : PAYA277

Amount of Each Receipt this Period
246.42

Local travel to be reimbursed

[MEMO ITEM]

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

0.00

**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 10 OF 26			
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address Processing Center		Amount of Each Disbursement this Period 166.72
City Des Monies	State IA Zip Code 50363-0001	
Purpose of Disbursement Office Supplies	001	Transaction ID : EXPB223
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 225 South Ivy		Amount of Each Disbursement this Period 44.00
City Monrovia	State CA Zip Code 91016	
Purpose of Disbursement postage	001	Transaction ID : EDTB33EXPB223
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Guitar Center		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 2660 East Colorado Blvd.		Amount of Each Disbursement this Period 21.74
City Pasadena	State CA Zip Code 91107	
Purpose of Disbursement office supplies	001	Transaction ID : EDTB35EXPB223
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	166.72
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 11 OF 26	
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address Processing Center		Amount of Each Disbursement this Period 50.00
City Des Monies	State IA Zip Code 50363-0001	
Purpose of Disbursement bank fee	Category/Type 001	Transaction ID : EDTB37EXPB223 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. HomeDepot		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 1625 S. Mountain Ave.		Amount of Each Disbursement this Period 32.06
City Monrovia	State CA Zip Code 91016	
Purpose of Disbursement office supplies	Category/Type 001	Transaction ID : EDTB36EXPB223 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. HomeDepot		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 1625 S. Mountain Ave.		Amount of Each Disbursement this Period 18.92
City Monrovia	State CA Zip Code 91016	
Purpose of Disbursement office supplies	Category/Type 001	Transaction ID : EDTB34EXPB223 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 12 OF 26	
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial)
A. Citi Cards

Mailing Address Processing Center

City Des Monies State IA Zip Code 50363-0001

Purpose of Disbursement Website services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 29 / 2012

Amount of Each Disbursement this Period: 124.98

Transaction ID : EXPB224

Category/Type: 003

Full Name (Last, First, Middle Initial)
B. Constant Contact Billing

Mailing Address 1601 Trapelo Rd., Ste. 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement Website services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 29 / 2012

Amount of Each Disbursement this Period: 124.98

Transaction ID : EDTB32EXPB224

[MEMO ITEM]

Category/Type: 003

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

Mailing Address Processing Center

City Des Monies State IA Zip Code 50363-0001

Purpose of Disbursement Newspaper

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 29 / 2012

Amount of Each Disbursement this Period: 75.00

Transaction ID : EXPB225

Category/Type: 004

SUBTOTAL of Disbursements This Page (optional)..... 199.98

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 13 OF 26			
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Arcadia Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 388 West Huntington Drive		Amount of Each Disbursement this Period 75.00
City Arcadia State CA Zip Code 91007	Purpose of Disbursement Newspaper	
Candidate Name	Category/Type 004	Transaction ID : EDTB23EXPB225 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address Processing Center		Amount of Each Disbursement this Period 5303.98
City Des Moines State IA Zip Code 50363-0001	Purpose of Disbursement Signs	
Candidate Name	Category/Type 006	Transaction ID : EXPB226
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Southern Nameplate & Graphics		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 1510 4th Ave., North		Amount of Each Disbursement this Period 2802.50
City Bessemer State AL Zip Code 35020	Purpose of Disbursement Signs	
Candidate Name	Category/Type 006	Transaction ID : EDTB21EXPB226 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5303.98
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 14 OF 26			
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Southern Nameplate & Graphics			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 1510 4th Ave., North			Amount of Each Disbursement this Period 2501.48
City Bessemer	State AL	Zip Code 35020	
Purpose of Disbursement Signs	Candidate Name		Transaction ID : EDTB22EXPB226 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 006		

Full Name (Last, First, Middle Initial) B. Citi Cards			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address Processing Center			Amount of Each Disbursement this Period 756.34
City Des Moines	State IA	Zip Code 50363-0001	
Purpose of Disbursement Appearance event meal expenses	Candidate Name		Transaction ID : EXPB227
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 007		

Full Name (Last, First, Middle Initial) c. El Cholo			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 260 E. Colorado Blvd.			Amount of Each Disbursement this Period 108.57
City Pasadena	State CA	Zip Code 91101	
Purpose of Disbursement Meals	Candidate Name		Transaction ID : EDTB24EXPB227 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 007		

SUBTOTAL of Disbursements This Page (optional).....	756.34
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 15 OF 26	
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Parkway Grill		Date of Disbursement MM / DD / YYYY 05 / 29 / 2012
Mailing Address 510 South Arroyo Parkway		Amount of Each Disbursement this Period 147.34
City Pasadena	State CA	Zip Code 91105
Purpose of Disbursement Meals	Category/Type 007	
Candidate Name		Transaction ID : EDTB25EXPB227
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) B. Los Angeles County Lincoln Club		Date of Disbursement MM / DD / YYYY 05 / 29 / 2012
Mailing Address 200 E. Rowland Ave.		Amount of Each Disbursement this Period 30.00
City Covina	State CA	Zip Code 91723
Purpose of Disbursement Meals	Category/Type 007	
Candidate Name		Transaction ID : EDTB29EXPB227
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) c. Los Angeles County Lincoln Club		Date of Disbursement MM / DD / YYYY 05 / 29 / 2012
Mailing Address 200 E. Rowland Ave.		Amount of Each Disbursement this Period 70.00
City Covina	State CA	Zip Code 91723
Purpose of Disbursement Meals	Category/Type 007	
Candidate Name		Transaction ID : EDTB30EXPB227
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 16 OF 26	
	<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)
Jack Orswell for Congress

A. Boys Scouts of America

Full Name (Last, First, Middle Initial)
Mailing Address 3450 E. Sierra Madre Blvd.

City Pasadena State CA Zip Code 91107

Purpose of Disbursement Meals
Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 05 / 29 / 2012

Amount of Each Disbursement this Period: 150.00

Transaction ID : EDTB26EXPB227

[MEMO ITEM]

B. Pacos Mexican Restaurant

Full Name (Last, First, Middle Initial)
Mailing Address 200 East Foothill

City Arcadia State CA Zip Code 91006

Purpose of Disbursement Meals
Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 05 / 29 / 2012

Amount of Each Disbursement this Period: 114.72

Transaction ID : EDTB27EXPB227

[MEMO ITEM]

C. Child Care Infor. Service

Full Name (Last, First, Middle Initial)
Mailing Address 2465 E. Walnut Street

City Pasadena State CA Zip Code 91106

Purpose of Disbursement Meals
Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 05 / 29 / 2012

Amount of Each Disbursement this Period: 50.00

Transaction ID : EDTB31EXPB227

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

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 17 OF 26			
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Clearman's Norh Woods Inn		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 7247 N Rosemead Blv.		Amount of Each Disbursement this Period 85.71
City San Gabriel State CA Zip Code 91775	Purpose of Disbursement Meals 007 Category/Type	
Candidate Name		Transaction ID : EDTB28EXPB227 [MEMO ITEM]
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Click & Pledge		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 12202 Airport Way, Ste. 100		Amount of Each Disbursement this Period 85.04
City Broomfield State CO Zip Code 80021	Purpose of Disbursement Merchant Fees 001 Category/Type	
Candidate Name		Transaction ID : EXPB245
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. John E Orswell		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1161 Volante Dr.		Amount of Each Disbursement this Period 301.37
City Arcadia State CA Zip Code 91007	Purpose of Disbursement Reimburse mileage for local travel 5/16-5/31/12 002 Category/Type	
Candidate Name		Transaction ID : EXPB238
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	386.41
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 18 OF 26			
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. John E Orswell		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1161 Volante Dr.		Amount of Each Disbursement this Period 343.55 Transaction ID : EXPB237
City Arcadia	State CA	
Purpose of Disbursement Reimburse mileage for local travel 5/1-/-5/15/12		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Turner, Laub & Escovar		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 888 S. Figueroa St., Ste. 860		Amount of Each Disbursement this Period 2627.25 Transaction ID : EXPB235
City Los Angeles	State CA	
Purpose of Disbursement Accounting		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Orswell and Kasman, Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 316 W. Foothill Blvd.		Amount of Each Disbursement this Period 533.50 Transaction ID : EXPB253
City Monrovia	State CA	
Purpose of Disbursement Rent, Telephone & Copier		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	3504.30
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 19 OF 26	
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address Processing Center		Amount of Each Disbursement this Period 322.00 Transaction ID : EXPB257
City Des Monies	State IA Zip Code 50363-0001	
Purpose of Disbursement Ad in newspaper	<input type="checkbox"/> 004 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. San Marino Tribune		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 1441 San Marino Ave.		Amount of Each Disbursement this Period 322.00 Transaction ID : EDTB38EXPB257 [MEMO ITEM]
City San Marino	State CA Zip Code 91108	
Purpose of Disbursement Ad in newspaper	<input type="checkbox"/> 004 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address Processing Center		Amount of Each Disbursement this Period 268.88 Transaction ID : EXPB258
City Des Monies	State IA Zip Code 50363-0001	
Purpose of Disbursement Campaign Rally Expenses	<input type="checkbox"/> 007 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	590.88
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 20 OF 26	
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Big Daddy's Fire Grill		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address 2122 E. Foothill Blvd.		Amount of Each Disbursement this Period 40.13
City Pasadena	State CA	Zip Code 91107
Purpose of Disbursement Food & Beverages	Category/ Type 007	
Candidate Name		Transaction ID : EDTB43EXPB258 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Gus's Barbeque		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address 808 Fair Oaks Ave.		Amount of Each Disbursement this Period 128.75
City South Pasadena	State CA	Zip Code 91030
Purpose of Disbursement Food & Beverages	Category/ Type 007	
Candidate Name		Transaction ID : EDTB42EXPB258 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) c. Bella Italia Restaurant		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address 7232 Rosemead Blvd,		Amount of Each Disbursement this Period 100.00
City San Gabriel	State CA	Zip Code 91755
Purpose of Disbursement Food & Beverages	Category/ Type 007	
Candidate Name		Transaction ID : EDTB41EXPB258 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 21 OF 26	
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Citi Cards		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address Processing Center		Amount of Each Disbursement this Period 451.83
City Des Monies	State IA Zip Code 50363-0001	
Purpose of Disbursement Printing & Website	Category/Type 003	Transaction ID : EXPB256
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Constant Contact Billing		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address 1601 Trapelo Rd., Ste. 329		Amount of Each Disbursement this Period 144.98
City Waltham	State MA Zip Code 02451	
Purpose of Disbursement Website	Category/Type 003	Transaction ID : EDTB39EXPB256
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. PrintRunner.com		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address 8000 Haskell Ave		Amount of Each Disbursement this Period 306.85
City Van Nuys	State CA Zip Code 91406	
Purpose of Disbursement Printing Services	Category/Type 003	Transaction ID : EDTB40EXPB256
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	451.83
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 22 OF 26			
	<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)
Jack Orswell for Congress

Full Name (Last, First, Middle Initial) A. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address Processing Center		Amount of Each Disbursement this Period 849.46 Transaction ID : EXPB259
City Des Monies	State IA Zip Code 50363-0001	
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Valencia & Associates		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 1619 W. Garvey Ave. N., #104		Amount of Each Disbursement this Period 500.00 Transaction ID : EXPB255
City West Covina	State CA Zip Code 91790	
Purpose of Disbursement Campaign Consulting	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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).....	1349.46
TOTAL This Period (last page this line number only).....	12709.90

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC234

Jack Orswell for Congress

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

John E Orswell

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1161 Volante Dr.

City State ZIP Code
Arcadia CA 91007

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
20000.00 0.00 20000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
02 / 29 / 2012 M M / D D / 11/09/2012 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 20000.00
TOTALS This Period (last page in this line only)..... 20000.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : PAYC234

Candidates personal funds

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Jack Orswell for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor John E Orswell	Nature of Debt (Purpose): Local travel to be reimbursed
Mailing Address 1161 Volante Dr.	
City State Zip Code Arcadia CA 91007	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD276	
Amount Incurred This Period 200.91	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.91

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor John E Orswell	Nature of Debt (Purpose): Local travel to be reimbursed
Mailing Address 1161 Volante Dr.	
City State Zip Code Arcadia CA 91007	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD277	
Amount Incurred This Period 246.42	Payment This Period 0.00	Outstanding Balance at Close of This Period 246.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Turner, Laub & Escovar	Nature of Debt (Purpose): Accounting
Mailing Address 888 S. Figueroa St., Ste. 860	
City State Zip Code Los Angeles CA 90017	

Outstanding Balance Beginning This Period 2627.25	Transaction ID : PAYD214	
Amount Incurred This Period 0.00	Payment This Period 2627.25	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	447.33
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Jack Orswell for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Turner, Laub & Escovar

Nature of Debt (Purpose):
Accounting

Mailing Address 888 S. Figueroa St., Ste. 860

City State Zip Code
Los Angeles CA 90017

Outstanding Balance Beginning This Period

Transaction ID : PAYD231

0.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

2591.50

0.00

2591.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Turner, Laub & Escovar

Nature of Debt (Purpose):
Accounting

Mailing Address 888 S. Figueroa St., Ste. 860

City State Zip Code
Los Angeles CA 90017

Outstanding Balance Beginning This Period

Transaction ID : PAYD263

0.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

2230.75

0.00

2230.75

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

4822.25

2) **TOTALS** This Period (last page this line number only) ▶

5269.58

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

20000.00

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

25269.58