

LAW OFFICE OF RICK YABOR, P.A.

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COCONUT GROVE, FL 33133

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January 16, 2014

Leonard O. Evans III
Attorney, Enforcement Division
Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

MUR 6655

Re: Justin Lamar Sternad, individually
Lamar Sternad for Congress, committee

Dear Mr. Evans:

As you know I represent the above referenced individual and committee. Pursuant to our agreement with the Federal Elections Commission, we have amended the FEC Form 3s in question and have submitted them to the FEC. We have fully implemented, are complying with, and will continue to comply with the requirements of the Agreement.

Specifically, in conjunction with this letter Mr. Sternad and the Lamar Sternad for Congress committee submitted the following amended documents:

1. FEC Form 3, July 15 Quarterly (Q2) 4/1/2012 through 6/30/2012;
2. FEC Form 3, Pre-Primary (PP) 7/1/2012 through 7/25/2012;
3. FEC Form 3, October 15 Quarterly (Q3) 7/26/2012 through 9/30/2012;
4. FEC Form 3, Year-End (YE) 10/1/2012 through 12/31/2012;
5. FEC Form 3, April 15 Quarterly (Q1) 1/1/2013 through 3/31/2013;
6. FEC Form 3, July 15 Quarterly (Q2) 4/1/2013 through 6/30/2013; and
7. FEC Form 3, October 15 Quarterly (Q3) 7/1/2013 through 9/30/2013.

As you also know, on February 22, 2013, the United States Attorney's Office filed an information against Mr. Sternad alleging:

1. Conspiracy to make a false statement and violate the Federal Election Campaign Act Title 18, united States Code, Section 371;
2. False Statement, Title 18, United States Code, Section 1001(a)(2); and
3. Illegal Campaigning Contributions, Title 2, United States Code, Sections 441a(s)(1)(A), 441a(f), and 437g(d)(1)(A)(i).

On March 15, 2013 Mr. Sternad plead guilty to all charges. We previously provided your office with a Factual Basis of the Guilty Plea, signed by all parties involved, including Mr. Sternad, providing details of the events related to your complaint.

*January 16, 2014 Letter to
Federal Elections Commission*

[REDACTED]

If you have any questions, or need additional information, please do not hesitate to contact the undersigned.

Sincerely,

LAW OFFICE OF RICK YABOR, P.A.


Rick L. Yabor

**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

LAMAR STERNAD FOR CONGRESS

ADDRESS (number and street)
▼

19790 SW 101 AVENUE

Check if different
than previously
reported. (ACC)

CUTLER BAY

FL

33157

- 8607

2. FEC IDENTIFICATION NUMBER ▼

C 00505529

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

26

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

04^M01^D2012^Y

through

06^M30^D2012^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 JUSTIN LAMAR STERNAD

Signature of Treasurer

Date

01 16 2014
11^M 13^D 2013^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

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	2

	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))	11,000.00	11,505.00
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	11,000.00	11,505.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	10,726.45	11,226.65
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	10,726.45	11,226.65
8. Cash on Hand at Close of Reporting Period (from Line 27)	306.95	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	28.60	

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)

Page 3

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	2

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)	11,000.00	11,505.00
(ii) Unitemized		
(iii) TOTAL of contributions from individuals	11,000.00	11,505.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11,000.00	11,505.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate	3.60	78.60
(b) All Other Loans		
(c) TOTAL LOANS (add Lines 13(a) and (b))	3.60	78.60
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	11,003.60	11,583.60

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	10,726.45	11,226.65
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	50.00
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	50.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	10,726.45	11,276.65

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	29.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11,003.60
25. SUBTOTAL (add Line 23 and Line 24)	11,033.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10,726.45
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	306.95

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 11

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	1	2

Amount of Each Receipt this Period

500.00

B. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	2

Amount of Each Receipt this Period

5,000.00

C. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	2

Amount of Each Receipt this Period

5,500.00

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

11,000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 11

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STERNAD, JUSTIN L.

Mailing Address

19790 SW 101 AVENUE

City

CUTLER BAY

State

FL

Zip Code

33157-8607

FEC ID number of contributing federal political committee.

C

Name of Employer

WYNDHAM GARDEN

Occupation

HOTEL AUDITOR

Receipt For: 2012

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

78.60

Date of Receipt

MM	DD	YYYY
04	12	2012

Amount of Each Receipt this Period

3.60

Full Name (Last, First, Middle Initial)

B.

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

MM	DD	YYYY

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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

MM	DD	YYYY

Amount of Each Receipt this Period

3.60

11,003.60

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

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 7 OF 11

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TD BANK

Mailing Address

19199 S. DIXIE HWY

City

CUTLER BAY

State

FL

Zip Code

33157

Purpose of Disbursement

MAINTENANCE FEE

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	1	2

Amount of Each Disbursement this Period

8.00

B. TD BANK

Mailing Address

19199 S. DIXIE HWY

City

CUTLER BAY

State

FL

Zip Code

33157

Purpose of Disbursement

MAINTENANCE FEE

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	1	2

Amount of Each Disbursement this Period

8.00

C. TD BANK

Mailing Address

19199 S. DIXIE HWY

City

CUTLER BAY

State

FL

Zip Code

33157

Purpose of Disbursement

MAINTENANCE FEE

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	9	/	2	0	1	2

Amount of Each Disbursement this Period

8.00

SUBTOTAL of Disbursements This Page (optional)

24.00

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 8 OF 11

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. USPS

 Mailing Address
 1300 WASHINGTON AVENUE

 City State Zip Code
 MIAMI BEACH FL 33119

 Purpose of Disbursement
 POSTAGE

 Candidate Name
 JUSTIN LAMAR STERNAD

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

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	2

Amount of Each Disbursement this Period

								3	.60

001

 Category/
 Type

B. BOOST MOBILE

 Mailing Address
 9060 IRVINE CENTER DRIVE

 City State Zip Code
 IRVINE CA 92618

 Purpose of Disbursement
 TELEPHONE

 Candidate Name
 JUSTIN LAMAR STERNAD

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

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	2

Amount of Each Disbursement this Period

								5	8.85

001

 Category/
 Type

C. FLORIDA DEPARTMENT OF STATE

 Mailing Address
 500 S. BRONOUGH ST. RM 316 GRAY BUILDING

 City State Zip Code
 TALLAHASSEE FL 32399

 Purpose of Disbursement
 QUALIFYING FEE

 Candidate Name
 JUSTIN LAMAR STERNAD

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

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	2

Amount of Each Disbursement this Period

								1	0,440.00

001

 Category/
 Type

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

10,502.45

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 9 OF 11

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. NILO, JENNY

 Mailing Address
 1425 SW 86 COURT

 City State Zip Code
 MIAMI FL 33144

 Purpose of Disbursement
 TRANSPORTATION

 Candidate Name
 JUSTIN LAMAR STERNAD

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

State: FL District: 26

Date of Disbursement

MM	DD	YYYY
05	18	2012

Amount of Each Disbursement this Period

200.00

002

 Category/
 Type

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

MM	DD	YYYY
----	----	------

Amount of Each Disbursement this Period

--

 Category/
 Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

MM	DD	YYYY
----	----	------

Amount of Each Disbursement this Period

--

 Category/
 Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

200.00

10,726.45

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 10 OF 11

 FOR LINE NUMBER:
 (check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

3.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3.60

TERMS

Date Incurred

 M / D / Y
 04 / 12 / 2012

Date Due

 M / D / Y
 ON / DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

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)..... ►

3.60

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 11 OF 11

 FOR LINE NUMBER:
 (check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

25.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25.00

TERMS

Date Incurred

 M M / D D / Y Y Y Y
 03 / 30 / 2012

Date Due

 M M / D D / Y Y Y Y
 ON / DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

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)..... ►

25.00

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

28.60

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

LAMAR STERNAD FOR CONGRESS

19790 S.W. 101 Avenue
Cutler Bay, FL 33157

January 16, 2014

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

Re: Lamar Sternad for Congress
FEC Form 3
July 15 Quarterly Report (Q2)
Additional Comments on Report


Dear Federal Elections Commission:

Regarding my Amendment to the above referenced report, the following are additional comments related to the report:

1. On page 5, item A, I have reported this \$500.00 contribution as "UNKNOWN CONTRIBUTOR" due to the fact that I have no knowledge as to original source of the funds. The contribution was given to me, in cash, by a third party from Ana Alliegro. I later discovered that Ana Alliegro was working with David Rivera
2. On page 5, item B, I have reported this \$5,000.00 contribution as "UNKNOWN CONTRIBUTOR" due to the fact that I have no knowledge as to the original source of the funds. These funds were deposited into my bank account by a person unknown to me for the purposes of covering my qualification fee. The deposit was coordinated by Ana Alliegro and/or David Rivera.
3. On page 5, item C, I have reported this \$5,500.00 contribution as "UNKNOWN CONTRIBUTOR" due to the fact that I have no knowledge as to the original source of the funds. These funds were deposited into my bank account by a person unknown to me for the purposes of covering my qualification fee. The deposit was coordinated by Ana Alliegro and/or David Rivera.

If you have any additional questions please contact my attorney Rick Yabor at (305) 322-5617.

Respectfully Submitted,



Justin Lamar Sternad

**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

LAMAR STERNAD FOR CONGRESS

ADDRESS (number and street)

19790 SW 101 AVENUE

Check if different
than previously
reported. (ACC)

CUTLER BAY

FL

33157

- 8607

2. FEC IDENTIFICATION NUMBER ▼

C 00505529

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

26

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

08

/

D

14

/

Y

2012

Y

Y

Y

in the
State of

FL

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M

M

/

D

D

/

Y

Y

Y

Y

Y

in the
State of

5. Covering Period

M

07

/

D

01

/

Y

2012

Y

Y

through

M

07

/

D

25

/

Y

2012

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

JUSTIN LAMAR STERNAD

Signature of Treasurer

Date

01 16 2014
11 13 2013

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

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M^M 07 / D^D 01 / Y^Y 2012

To:

M^M 07 / D^D 25 / Y^Y 2012

	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))....	29,561.35	41,066.35
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	29,561.35	41,066.35
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	29,564.21	40,790.86
(b) Total Offsets to Operating Expenditures (from Line 14).....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	29,564.21	40,790.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	304.09	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	28.60	

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)

Page 3

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	1	2

To:

M	M	D	D	Y	Y	Y	Y
0	7	2	5	2	0	1	2

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)

29,561.35

41,066.35

(ii) Unitemized

(iii) TOTAL of contributions
from individuals ▶

29,561.35

41,066.35

(b) Political Party Committees

(c) Other Political Committees
(such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS
(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

29,561.35

41,066.35

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES****13. LOANS:**(a) Made or Guaranteed by the
Candidate

0.00

78.60

(b) All Other Loans

(c) TOTAL LOANS

(add Lines 13(a) and (b))

0.00

78.60

**14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)****15. OTHER RECEIPTS
(Dividends, Interest, etc.)****16. TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)

29,561.35

41,144.95

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

Page 4

II. DISBURSEMENTS**COLUMN A
Total This Period****COLUMN B
Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....	29,564.21	40,790.86
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	50.00
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	50.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	29,564.21	40,840.86

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	306.95
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	29,561.35
25. SUBTOTAL (add Line 23 and Line 24).....	29,868.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	29,564.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	304.09

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	2

Amount of Each Receipt this Period

1,060.00

B. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	2

Amount of Each Receipt this Period

2,600.00

C. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	2

Amount of Each Receipt this Period

10,000.00

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

13,660.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	D D	Y Y Y Y Y Y
07	24	2012

Amount of Each Receipt this Period

15,901.35

B.

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.

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).....

15,901.35

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

29,561.35

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 7 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. USPS

 Mailing Address
 1300 WASHINGTON AVENUE

City	State	Zip Code
MIAMI BEACH	FL	33119

 Purpose of Disbursement
 POSTAGE

001

 Candidate Name
 JUSTIN LAMAR STERNAD

 Category/
 Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2012
	<input type="checkbox"/> Senate	
	<input type="checkbox"/> President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	2

Amount of Each Disbursement this Period

4.45

B. USPS

 Mailing Address
 1300 WASHINGTON AVENUE

City	State	Zip Code
MIAMI BEACH	FL	33119

 Purpose of Disbursement
 POSTAGE

001

 Candidate Name
 JUSTIN LAMAR STERNAD

 Category/
 Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2012
	<input type="checkbox"/> Senate	
	<input type="checkbox"/> President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	2

Amount of Each Disbursement this Period

3.80

C. USPS

 Mailing Address
 1300 WASHINGTON AVENUE

City	State	Zip Code
MIAMI BEACH	FL	33119

 Purpose of Disbursement
 POSTAGE

001

 Candidate Name
 JUSTIN LAMAR STERNAD

 Category/
 Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2012
	<input type="checkbox"/> Senate	
	<input type="checkbox"/> President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	2

Amount of Each Disbursement this Period

7.70

SUBTOTAL of Disbursements This Page (optional)

15.95

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 8 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LIVE COLOR GROUP, LLC.

Mailing Address

8932 SW 40th STREET

City

MIAMI

State

FL

Zip Code

33165

Purpose of Disbursement

GRAPHICS & SIGNAGE (VEHICLE)

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	2	/	2	0	1	2

Amount of Each Disbursement this Period

90.95

Full Name (Last, First, Middle Initial)

B. BOOST MOBILE

Mailing Address

9060 IRVINE CENTER DRIVE

City

IRVINE

State

CA

Zip Code

92618

Purpose of Disbursement

TELEPHONE

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	2	/	2	0	1	2

Amount of Each Disbursement this Period

58.85

Full Name (Last, First, Middle Initial)

C. WALMART

Mailing Address

33501 S. DIXIE HWY

City

FLORIDA CITY

State

FL

Zip Code

33034

Purpose of Disbursement

OFFICE SUPPLY

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	1	/	2	0	1	2

Amount of Each Disbursement this Period

20.23

SUBTOTAL of Disbursements This Page (optional)

170.03

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 9 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ENTERPRISE RENT A CAR

Mailing Address

17720 S. DIXIE HWY

City

PERRINE

State

FL

Zip Code

33157

Purpose of Disbursement

TRANSPORTATION: RENTAL VEHICLE

002

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	2	/	2	0	1	2

Amount of Each Disbursement this Period

350.05

B. ENTERPRISE RENT A CAR

Mailing Address

17720 S. DIXIE HWY

City

PERRINE

State

FL

Zip Code

33157

Purpose of Disbursement

TRANSPORTATION: RENTAL VEHICLE

002

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	0	/	2	0	1	2

Amount of Each Disbursement this Period

150.05

C. ENTERPRISE RENT A CAR

Mailing Address

17720 S. DIXIE HWY

City

PERRINE

State

FL

Zip Code

33157

Purpose of Disbursement

TRANSPORTATION: RENTAL VEHICLE

002

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	7	/	2	0	1	2

Amount of Each Disbursement this Period

215.90

SUBTOTAL of Disbursements This Page (optional)

716.00

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 10 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PUBLIX SUPERMARKET

Mailing Address

101437 OVERSEAS HWY

City

KEY LARGO

State

FL

Zip Code

33037

Purpose of Disbursement

JULY 4TH PARADE CANDY

007

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐ Senate

☐ President

Disbursement For: 2012

☒

Primary

☐ General

☐ Other (specify)

State: FL

District: 26

Date of Disbursement

07	04	2012
----	----	------

Amount of Each Disbursement this Period

17.79

B. SUNSHINE BP #149

Mailing Address

16815 S DIXIE HWY

City

PERRINE

State

FL

Zip Code

33157

Purpose of Disbursement

TRANSPORTATION: FUEL

002

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐ Senate

☐ President

Disbursement For: 2012

☒

Primary

☐ General

☐ Other (specify)

State: FL

District: 26

Date of Disbursement

07	03	2012
----	----	------

Amount of Each Disbursement this Period

32.30

C. SUNSHINE BP #149

Mailing Address

16815 S DIXIE HWY

City

PERRINE

State

FL

Zip Code

33157

Purpose of Disbursement

TRANSPORTATION: FUEL

002

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐ Senate

☐ President

Disbursement For: 2012

☒

Primary

☐ General

☐ Other (specify)

State: FL

District: 26

Date of Disbursement

07	07	2012
----	----	------

Amount of Each Disbursement this Period

35.60

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

85.69

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 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SUNSHINE BP #149 Mailing Address 16815 S DIXIE HWY City State Zip Code PERRINE FL 33157 Purpose of Disbursement TRANSPORTATION: FUEL Candidate Name JUSTIN LAMAR STERNAD Office Sought: <input checked="" 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: FL District: 26		Date of Disbursement 07 / 13 / 2012 Amount of Each Disbursement this Period 35.75 Category/ Type 002
---	--	--

Full Name (Last, First, Middle Initial)

B. SUNSHINE SHELL #234 Mailing Address 18600 S DIXIE HWY City State Zip Code MIAMI FL 33157 Purpose of Disbursement TRANSPORTATION: FUEL Candidate Name JUSTIN LAMAR STERNAD Office Sought: <input checked="" 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: FL District: 26		Date of Disbursement 07 / 19 / 2012 Amount of Each Disbursement this Period 24.44 Category/ Type 002
--	--	--

Full Name (Last, First, Middle Initial)

C. SHELL #2624 Mailing Address 20195 S DIXIE HWY City State Zip Code CUTLER BAY FL 33189 Purpose of Disbursement TRANSPORTATION: FUEL Candidate Name JUSTIN LAMAR STERNAD Office Sought: <input checked="" 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: FL District: 26		Date of Disbursement 07 / 20 / 2012 Amount of Each Disbursement this Period 15.00 Category/ Type 002
---	--	--

SUBTOTAL of Disbursements This Page (optional)

75.19

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 12 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

Purpose of Disbursement

CONTRIBUTION IN-KIND: GRAPHIC DESIGN FOR MAILERS

004

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For: 2012

☒ Primary

☐ General

☐ Other (specify)

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	4	/	2	0	1	2

Amount of Each Disbursement this Period

						2	,	6	0

IN-KIND CONTRIBUTION

B. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

Purpose of Disbursement

CONTRIBUTION IN-KIND: PRINTING FOR MAILERS

004

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For: 2012

☒ Primary

☐ General

☐ Other (specify)

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	2

Amount of Each Disbursement this Period

						1	,	0	0

IN-KIND CONTRIBUTION

C. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

Purpose of Disbursement

CONTRIBUTION IN-KIND: MASS MAILING FEES & POSTAGE

006

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For: 2012

☒ Primary

☐ General

☐ Other (specify)

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	4	/	2	0	1	2

Amount of Each Disbursement this Period

						1	,	5	9

IN-KIND CONTRIBUTION

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

28,501.35

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

29,564.21

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 13 OF 14

 FOR LINE NUMBER:
 (check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

3.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3.60

TERMS

Date Incurred

M 04 / D 12 / Y 2012

Date Due

M M / D ON / Y DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

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)..... ►

3.60

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 14 OF 14

 FOR LINE NUMBER:
 (check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

25.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25.00

TERMS

Date Incurred

MM / DD / YYYY
03 / 30 / 2012

Date Due

MM / DD / YYYY
ON / DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

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)..... ►

25.00

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

28.60

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

LAMAR STERNAD FOR CONGRESS

19790 S.W. 101 Avenue
Cutler Bay, FL 33157

January 16, 2014

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

Re: Lamar Sternad for Congress
FEC Form 3
Pre-Election Report - Primary (12P)
Additional Comments on Report

Dear Federal Elections Commission:

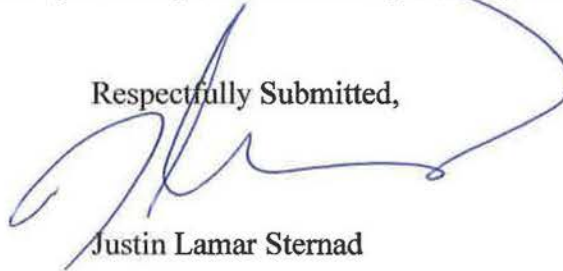
Regarding my Amendment to the above referenced report, the following are additional comments related to the report:

1. On page 5, item A, I have reported this \$1,060.00 contribution as "UNKNOWN CONTRIBUTOR" due to the fact that I have no knowledge as to original source of the funds. These funds were deposited into my bank account by a person unknown to me for the purposes of covering costs associated with the rental of a vehicle for use during campaigning. The deposit was coordinated by Ana Alliegro and/or David Rivera.
2. On page 5, item B, I have reported this \$2,600.00 contribution as "UNKNOWN CONTRIBUTOR" due to the fact that I have no knowledge as to original source of the funds. This was an in-kind contribution that relates to Schedule B, page 12, item A. This in-kind contribution was paid directly to Expert Printing, 6826 NW 77th Court, Doral, FL 33166 by Ana Alliegro and/or David Rivera.
3. On page 5, item C, I have reported this \$10,000.00 contribution as "UNKNOWN CONTRIBUTOR" due to the fact that I have no knowledge as to original source of the funds. This was an in-kind contribution that relates to Schedule B, page 12, item B. This in-kind contribution was paid directly to Expert Printing, 6826 NW 77th Court, Doral, FL 33166 by Ana Alliegro and/or David Rivera.
4. On page 6, item A, I have reported this \$15,901.35 contribution as "UNKNOWN CONTRIBUTOR" due to the fact that I have no knowledge as to original source of the funds. This was an in-kind contribution that relates to Schedule B, page 12, item C. This in-kind contribution was paid directly to Rapid Mail, 830 W 19th

Street, Hialeah, FL 33010 by Ana Alliegro and/or David Rivera.

If you have any additional questions please contact my attorney Rick Yabor at (305) 322-5617.

Respectfully Submitted,

A handwritten signature in blue ink, appearing to read "Justin Lamar Sternad", written over the typed name.

Justin Lamar Sternad

**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

LAMAR STERNAD FOR CONGRESS

ADDRESS (number and street)
▼

19790 SW 101 AVENUE

Check if different
than previously
reported. (ACC)

CUTLER BAY

FL

33157

- 8607

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C 00505529

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

26

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
07 / 26 / 2012

through

M M / D D / Y Y Y Y
09 / 30 / 2012

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

JUSTIN LAMAR STERNAD

Signature of Treasurer

Date

01 16 2014
11 13 2013

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

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M^M 07 / D^D 26 / Y^Y 2012

To:

M^M 09 / D^D 30 / Y^Y 2012

	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))....	40,964.79	82,031.14
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	40,964.79	82,031.14
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	41,268.13	82,058.99
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	41,268.13	82,058.99
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	27.85	

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)

Page 3

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M 07 / D 26 / Y 2012

To:

M 09 / D 30 / Y 2012

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).....

40,924.85

81,991.12

(ii) Unitemized

(iii) TOTAL of contributions

from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs)

(d) The Candidate

39.94

39.94

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

40,964.79

82,031.14

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES****13. LOANS:**(a) Made or Guaranteed by the
Candidate.....

78.60

(b) All Other Loans.....

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

78.60

**14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)****15. OTHER RECEIPTS
(Dividends, Interest, etc.)****16. TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

40,964.79

82,109.74

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

Page 4

II. DISBURSEMENTS**COLUMN A
Total This Period****COLUMN B
Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....	41,268.13	82,058.99
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.75	50.75
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.75	50.75
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	41,268.88	82,109.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	306.95
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	40,964.79
25. SUBTOTAL (add Line 23 and Line 24).....	41,271.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41,268.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	D D	Y Y Y Y
08	02	2012

Amount of Each Receipt this Period

5,000.00

B. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	D D	Y Y Y Y
08	08	2012

Amount of Each Receipt this Period

22,100.00

C. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	D D	Y Y Y Y
08	09	2012

Amount of Each Receipt this Period

13,824.85

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

40,924.85

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
---	------------------------------	------------------------------	------------------------------	-----------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STERNAD, JUSTIN L.

Mailing Address

19790 SW 101 AVENUE

City

CUTLER BAY

State

FL

Zip Code

33157-8607

FEC ID number of contributing federal political committee.

C

Name of Employer

WYNDHAM GARDEN

Occupation

HOTEL AUDITOR

Receipt For: 2012

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

39.94

Date of Receipt

08	06	2012
----	----	------

Amount of Each Receipt this Period

39.94

Full Name (Last, First, Middle Initial)

B.

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

--	--	--

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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

--	--	--

Amount of Each Receipt this Period

39.94

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

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

40,964.79

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 7 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SUNSHINE BP #149

Mailing Address

16815 S DIXIE HWY

City

PERRINE

State

FL

Zip Code

33157

Purpose of Disbursement

TRANSPORTATION:FUEL

002

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For: 2012

☒ Primary

☐ General

☐ Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	4	/	2	0	1	2

Amount of Each Disbursement this Period

								2	5
								.	0

Full Name (Last, First, Middle Initial)

B. SUNSHINE #43

Mailing Address

2801 NW 42ND AVENUE

City

MIAMI

State

FL

Zip Code

33142

Purpose of Disbursement

TRANSPORTATION:FUEL

002

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For: 2012

☒ Primary

☐ General

☐ Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	6	/	2	0	1	2

Amount of Each Disbursement this Period

								1	7
								.	1

Full Name (Last, First, Middle Initial)

C. SUNSHINE BP #149

Mailing Address

16815 S DIXIE HWY

City

PERRINE

State

FL

Zip Code

33157

Purpose of Disbursement

TRANSPORTATION:FUEL

002

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For: 2012

☒ Primary

☐ General

☐ Other (specify)

State: FL

District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	8	/	2	0	1	2

Amount of Each Disbursement this Period

								3	9
								.	1

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

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

81.32

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 8 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SUNSHINE BP #149

 Mailing Address
 16815 S DIXIE HWY

City	State	Zip Code
PERRINE	FL	33157

 Purpose of Disbursement
 TRANSPORTATION: FUEL

002

 Candidate Name
 JUSTIN LAMAR STERNAD

 Category/
 Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2012
	<input type="checkbox"/> Senate	
	<input type="checkbox"/> President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	1	2

Amount of Each Disbursement this Period

10.05

B. ENTERPRISE RENT A CAR

 Mailing Address
 17720 S DIXIE HWY

City	State	Zip Code
PERRINE	FL	33157

 Purpose of Disbursement
 TRANSPORTATION: RENTAL VEHICLE

002

 Candidate Name
 JUSTIN LAMAR STERNAD

 Category/
 Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2012
	<input type="checkbox"/> Senate	
	<input type="checkbox"/> President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	6	/	2	0	1	2

Amount of Each Disbursement this Period

136.44

C. ENTERPRISE RENT A CAR

 Mailing Address
 17720 S DIXIE HWY

City	State	Zip Code
PERRINE	FL	33157

 Purpose of Disbursement
 TRANSPORTATION: RENTAL VEHICLE TOLLS

002

 Candidate Name
 JUSTIN LAMAR STERNAD

 Category/
 Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2012
	<input type="checkbox"/> Senate	
	<input type="checkbox"/> President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: FL District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	6	/	2	0	1	2

Amount of Each Disbursement this Period

3.25

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

149.74

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 9 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BOOST MOBILE

Mailing Address

9060 IRVINE CENTER DRIVE

City

IRVINE

State

CA

Zip Code

92618

Purpose of Disbursement

TELEPHONE

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

08	01	2012
----	----	------

Amount of Each Disbursement this Period

58.85

B. USPS

Mailing Address

10360 SW 186TH STREET

City

MIAMI

State

FL

Zip Code

33197-9998

Purpose of Disbursement

POSTAGE

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

08	02	2012
----	----	------

Amount of Each Disbursement this Period

18.95

C. USPS

Mailing Address

1300 WASHINGTON AVENUE

City

MIAMI BEACH

State

FL

Zip Code

33119

Purpose of Disbursement

POSTAGE

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

08	20	2012
----	----	------

Amount of Each Disbursement this Period

18.95

SUBTOTAL of Disbursements This Page (optional)

96.75

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 10 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FEDEX OFFICE

Mailing Address

18755 S DIXIE HWY

City

MIAMI

State

FL

Zip Code

33157

Purpose of Disbursement

PRINTING

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

08	02	2012
----	----	------

Amount of Each Disbursement this Period

2.83

B. FEDEX OFFICE

Mailing Address

18755 S DIXIE HWY

City

MIAMI

State

FL

Zip Code

33157

Purpose of Disbursement

FAX SERVICES

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

08	06	2012
----	----	------

Amount of Each Disbursement this Period

12.64

C. UNKNOWN CONTRIBUTOR

Mailing Address

City

State

Zip Code

Purpose of Disbursement

CONTRIBUTION IN-KIND: PRINTING FOR MAILERS

004

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

08	02	2012
----	----	------

Amount of Each Disbursement this Period

5,000.00

IN-KIND CONTRIBUTION

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

5,015.47

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 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

Purpose of Disbursement

CONTRIBUTION IN-KIND: PRINTING FOR MAILERS

004

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

08	09	2012
----	----	------

Amount of Each Disbursement this Period

4,824.85

IN-KIND CONTRIBUTION

B. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

Purpose of Disbursement

CONTRIBUTION IN-KIND: MASS MAILING FEES & POSTAGE

006

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

08	08	2012
----	----	------

Amount of Each Disbursement this Period

22,100.00

IN-KIND CONTRIBUTION

C. UNKNOWN CONTRIBUTOR

Mailing Address

City State Zip Code

Purpose of Disbursement

CONTRIBUTION IN-KIND: MASS MAILING FEES & POSTAGE

006

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify)

State: FL

District: 26

Date of Disbursement

08	09	2012
----	----	------

Amount of Each Disbursement this Period

9,000.00

IN-KIND CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

35,924.85

TOTAL This Period (last page this line number only)

SCHEDULE C (FEC Form 3)
LOANS

PAGE 13 OF 14

 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)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

3.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3.60

TERMS

Date Incurred

M 04 / D 12 / Y 2012

Date Due

M M / D D / Y Y Y Y
ON DEMAND

Interest Rate

0.00

% (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

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)..... ►

3.60

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 14 OF 14

 FOR LINE NUMBER:
 (check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

25.00

Cumulative Payment To Date

0.75

Balance Outstanding at Close of This Period

24.25

TERMS

Date Incurred

 M M / D D / Y Y Y Y
 03 / 30 / 2012

Date Due

 M M / D D / Y Y Y Y
 ON / DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

X

 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)..... ►

24.25

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

27.85

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

LAMAR STERNAD FOR CONGRESS

19790 S.W. 101 Avenue
Cutler Bay, FL 33157

January 16, 2014

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

Re: Lamar Sternad for Congress
FEC Form 3
October 15 Quarterly Report (Q3)
Additional Comments on Report

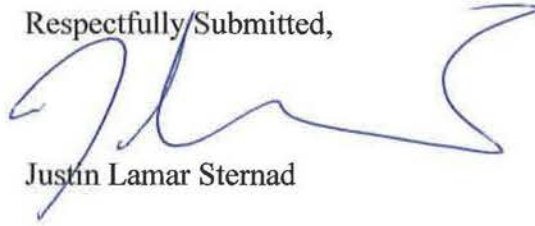
Dear Federal Elections Commission:

Regarding my Amendment to the above referenced report, the following are additional comments related to the report:

1. On page 5, item A, I have reported this \$5,000.00 contribution as "UNKNOWN CONTRIBUTOR" due to the fact that I have no knowledge as to original source of the funds. This was an in-kind contribution that relates to Schedule B, page 10, item C. This in-kind contribution was paid directly to Expert Printing, 6826 NW 77th Court, Doral, FL 33166 by Ana Alliegro and/or David Rivera.
2. On page 5, item B, I have reported this \$22,100.00 contribution as "UNKNOWN CONTRIBUTOR" due to the fact that I have no knowledge as to original source of the funds. This was an in-kind contribution that relates to Schedule B, page 11, item B. This in-kind contribution was paid directly to Rapid Mail, 830 W 19th Street, Hialeah, FL 33010 by Ana Alliegro and/or David Rivera.
3. On page 5, item C, I have reported this \$13,824.85 contribution as "UNKNOWN CONTRIBUTOR" due to the fact that I have no knowledge as to original source of the funds. This contribution was paid via a check by a contributor unknown to me. Ana Alliegro and/or David Rivera instructed Expert Printing to use these funds to print mailers and pay \$9,000.00 to Rapid Mail for distribution. This was an in-kind contribution that relates to Schedule B, page 11, item A for \$4,824.85 and Schedule B, page 11, item C for \$9,000.00. This in-kind contribution was paid directly to Expert Printing, 6826 NW 77th Court, Doral, FL 33166 by an unknown contributor. Expert Printing then paid \$9,000.00 to Rapid Mail, 830 W 19th Street, Hialeah, FL 33010. This transaction was coordinated by Ana Alliegro and/or David Rivera.

If you have any additional questions please contact my attorney Rick Yabor at (305) 322-5617.

Respectfully Submitted,

A handwritten signature in blue ink, appearing to read "Justin Sternad", with a large, stylized flourish extending to the right.

Justin Lamar Sternad

**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

LAMAR STERNAD FOR CONGRESS

ADDRESS (number and street)
▼

19790 SW 101 AVENUE

☐ Check if different
than previously
reported. (ACC)

CUTLER BAY

FL

33157

8607

2. FEC IDENTIFICATION NUMBER ▼

C 00505529

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

FL

26

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

10^M01^D2012^Y

through

12^M31^D2012^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

JUSTIN LAMAR STERNAD

Signature of Treasurer

Date

01 16 2014
11 13 2013

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

LAMAR STERNAD 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))	3.80	82,035.24
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	3.80	82,035.24
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3.80	82,062.79
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3.80	82,062.79
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	27.85	

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)

Page 3

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

 M¹⁰ / D⁰¹ / Y²⁰¹²

To:

 M¹² / D³¹ / Y²⁰¹²
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)

0.00

81,991.12

(ii) Unitemized

(iii) TOTAL of contributions from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs)

(d) The Candidate

3.80

43.74

(e) TOTAL CONTRIBUTIONS (other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

3.80

82,034.86

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

78.60

(b) All Other Loans.....

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

78.60

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)**15. OTHER RECEIPTS (Dividends, Interest, etc.)****16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

3.80

82,113.46

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

Page 4

II. DISBURSEMENTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

3.80

82,062.79

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate.....

50.75

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS

(add Lines 19(a) and (b)).....

50.75

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs)(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

21. OTHER DISBURSEMENTS

22. TOTAL DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21) ►

3.80

82,113.54

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

0.00

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

3.80

25. SUBTOTAL (add Line 23 and Line 24).....

3.80

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

3.80

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 8

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
---	------------------------------	------------------------------	------------------------------	-----------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STERNAD, JUSTIN L.

Mailing Address

19790 SW 101 AVENUE

City

State

Zip Code

CUTLER BAY

FL

33157-8607

FEC ID number of contributing
federal political committee.

C

Name of Employer

WYNDHAM GARDEN

Occupation

HOTEL AUDITOR

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

43.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	5		2	0	1	2		

Amount of Each Receipt this Period

3.80

Full Name (Last, First, Middle Initial)

B. 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

Full Name (Last, First, Middle Initial)

C. 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)

3.80

SCHEDULE C (FEC Form 3)
LOANS

PAGE 7 OF 8

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)
☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

3.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3.60

TERMS

Date Incurred

M 04 / D 12 / Y 2012

Date Due

M M / D ON / Y DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

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)..... ▶

3.60

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

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

SCHEDULE C (FEC Form 3)

PAGE 8 OF 8

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b**LOANS**

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

25.00

Cumulative Payment To Date

0.75

Balance Outstanding at Close of This Period

24.25

TERMS

Date Incurred

M 03 / D 30 / Y 2012

Date Due

M / D / Y
ON DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

X

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)..... ►

24.25

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

27.85

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

**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

LAMAR STERNAD FOR CONGRESS

ADDRESS (number and street)
▼

19790 SW 101 AVENUE

Check if different
than previously
reported. (ACC)

CUTLER BAY

FL

33157

- 8607

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C 00505529

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

26

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

01^M / 01^D / 2013^{Y Y}

through

03^M / 31^D / 2013^{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 JUSTIN LAMAR STERNAD

Signature of Treasurer

Date

01 16 2014
11 13 2013

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

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M^M 01 / D^D 01 / Y^Y 2013

To:

M^M 03 / D^D 31 / Y^Y 2013

	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))	8.70	8.70
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	8.70	8.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8.70	8.70
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	8.70	8.70
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	27.85	

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)

Page 3

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M 01 / D 01 / Y 2013

To:

M 03 / D 31 / Y 2013

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)

(ii) Unitemized

(iii) TOTAL of contributions
from individuals

(b) Political Party Committees

(c) Other Political Committees
(such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

8.70

8.70

8.70

8.70

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES****13. LOANS:**(a) Made or Guaranteed by the
Candidate

(b) All Other Loans

(c) TOTAL LOANS
(add Lines 13(a) and (b))**14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)****15. OTHER RECEIPTS
(Dividends, Interest, etc.)****16. TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)

8.70

8.70

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	8.70	8.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	8.70	8.70

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8.70
25. SUBTOTAL (add Line 23 and Line 24).....	8.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 8

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STERNAD, JUSTIN L.

Mailing Address

19790 SW 101 AVENUE

City

State

Zip Code

CUTLER BAY

FL

33157-8607

FEC ID number of contributing
federal political committee.

C

Name of Employer

WYNDHAM GARDEN

Occupation

HOTEL AUDITOR

Receipt For: OPEN COMMITTEE 2012 CYCLE

☐

Primary

☐

General

☒

Other (specify)

Election Cycle-to-Date

8.70

Date of Receipt

01	28	2013
----	----	------

Amount of Each Receipt this Period

8.70

Full Name (Last, First, Middle Initial)

B.

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

--	--	--

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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

--	--	--

Amount of Each Receipt this Period

8.70

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

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 6 OF 8

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	1	3

Amount of Each Disbursement this Period

8	.	7	0
---	---	---	---

A.
 USPS

Mailing Address

1300 WASHINGTON AVENUE

City

MIAMI BEACH

State

FL

Zip Code

33119

Purpose of Disbursement

POSTAGE

001

Candidate Name

JUSTIN LAMAR STERNAD

 Category/
 Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For: OPEN COMMITTEE 2012 CYCLE

☐ Primary

☐ General

☒ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--	--	--

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Category/
 Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--	--	--

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Category/
 Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

--	--	--	--	--	--	--	--	--	--

8	.	7	0
---	---	---	---

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 7 OF 8

 FOR LINE NUMBER:
 (check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

3.60

0.00

3.60

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

04 / 12 / 2012

ON / DEMAND

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)..... ►

3.60

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 8 OF 8

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)
☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

25.00

Cumulative Payment To Date

0.75

Balance Outstanding at Close of This Period

24.25

TERMS

Date Incurred

 / /

03

30

2012

Date Due

 / /

ON

DEMAND

Interest Rate

0.00

% (apr)

Secured:

☐ Yes
☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

X

 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)..... ►

24.25

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

27.85

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

**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

LAMAR STERNAD FOR CONGRESS

ADDRESS (number and street)

19790 SW 101 AVENUE

Check if different
than previously
reported. (ACC)

CUTLER BAY

FL

33157

- 8607

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C 00505529

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

26

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

04^M / 01^D / 2013^Y Y

through

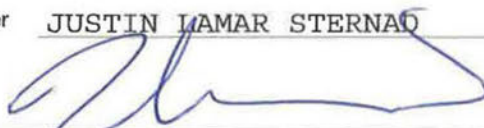
06^M / 30^D / 2013^Y Y

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

JUSTIN LAMAR STERNAD

Signature of Treasurer



Date

01 / 16 / 2014
11^M / 13^D / 2013^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

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M⁰⁴ / D⁰¹ / Y²⁰¹³

To:

M⁰⁶ / D³⁰ / Y²⁰¹³

	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))	8.70	17.40
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	8.70	17.40
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8.70	17.40
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	8.70	17.40
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	27.85	

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)

Page 3

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M⁰⁴ / D⁰¹ / Y²⁰¹³

To:

M⁰⁶ / D³⁰ / Y²⁰¹³**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)

(ii) Unitemized

(iii) TOTAL of contributions
from individuals

(b) Political Party Committees

(c) Other Political Committees
(such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

8.70

17.40

8.70

17.40

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES****13. LOANS:**(a) Made or Guaranteed by the
Candidate

(b) All Other Loans

(c) TOTAL LOANS
(add Lines 13(a) and (b))**14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)****15. OTHER RECEIPTS
(Dividends, Interest, etc.)****16. TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)

8.70

17.40

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	8.70	17.40
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	8.70	17.40

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8.70
25. SUBTOTAL (add Line 23 and Line 24).....	8.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 5 OF 8	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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) LAMAR STERNAD FOR CONGRESS	
Full Name (Last, First, Middle Initial) A. STERNAD, JUSTIN L. Mailing Address 19790 SW 101 AVENUE City State Zip Code CUTLER BAY FL 33157-8607 FEC ID number of contributing federal political committee. C Name of Employer Occupation CAMBEAN HOSPITALITY HOTEL AUDITOR Receipt For: OPEN COMMITTEE 2012 CYCLE <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Election Cycle-to-Date 17.40	Date of Receipt 04 / 12 / 2013 Amount of Each Receipt this Period 8.70
Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date	Date of Receipt Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date	Date of Receipt Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional).....	
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 6 OF 8

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2013

A. USPS

Mailing Address

10360 SW 186TH STREET

City

MIAMI

State

FL

Zip Code

33197-9998

Purpose of Disbursement

POSTAGE

001

 Category/
Type

Candidate Name

JUSTIN LAMAR STERNAD

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For: OPEN COMMITTEE 2012 CYCLE

☐ Primary

☐ General

☒ Other (specify)

State:

District:

Amount of Each Disbursement this Period

8.70

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY
/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY
/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

8.70

SCHEDULE C (FEC Form 3)
LOANS

PAGE 7 OF 8

 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)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

3.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3.60

TERMS

Date Incurred

 M M / D D / Y Y Y Y
 04 / 12 / 2012

Date Due

 M M / D D / Y Y Y Y
 ON / DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

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)..... ►

3.60

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 8 OF 8

 FOR LINE NUMBER:
 (check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

25.00

Cumulative Payment To Date

0.75

Balance Outstanding at Close of This Period

24.25

TERMS

Date Incurred

 M M / D D / Y Y Y Y
 03 / 30 / 2012

Date Due

 M M / D D / Y Y Y Y
 ON / DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

X

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)..... ►

24.25

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

27.85

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

**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

LAMAR STERNAD FOR CONGRESS

ADDRESS (number and street)
▼

19790 SW 101 AVENUE

Check if different
than previously
reported. (ACC)

CUTLER BAY

FL

33157

- 8607

2. FEC IDENTIFICATION NUMBER ▼

C 00505529

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORT☐ NEW
(N)

OR

☒ AMENDED
(A)

FL

26

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

07

01

2013

through

09

30

2013

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 JUSTIN LAMAR STERNAD

Signature of Treasurer

Date

01 16 2014
11 13 2013

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)

SCHEDULE C (FEC Form 3)
LOANS

PAGE 7 OF 8

 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)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

3.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3.60

TERMS

Date Incurred

04 / 12 / 2012

Date Due

ON / DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

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)..... ►

3.60

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

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

SCHEDULE C (FEC Form 3)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 8 OF 8

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

25.00

Cumulative Payment To Date

0.75

Balance Outstanding at Close of This Period

24.25

TERMS

Date Incurred

03 / 30 / 2012

Date Due

ON / DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

X

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)..... ►

24.25

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

27.85

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

**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

LAMAR STERNAD FOR CONGRESS

ADDRESS (number and street)

19790 SW 101 AVENUE

Check if different
than previously
reported. (ACC)

CUTLER BAY

FL

33157

- 8607

2. FEC IDENTIFICATION NUMBER ▼

C 00505529

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

26

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

07

01

2013

through

09

30

2013

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 JUSTIN LAMAR STERNAD

Signature of Treasurer

Date

01 16 2014
11 13 2013

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

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

M⁰⁷ / D⁰¹ / Y²⁰¹³

To:

M⁰⁹ / D³⁰ / Y²⁰¹³

	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))	8.70	26.10
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	8.70	26.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8.70	26.10
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	8.70	26.10
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	27.85	

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)

Page 3

Write or Type Committee Name

LAMAR STERNAD FOR CONGRESS

Report Covering the Period:

From:

 M^M 07 / D^D 01 / Y^Y 2013 Y^Y

To:

 M^M 09 / D^D 30 / Y^Y 2013 Y^Y

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).....		
(ii) Unitemized		
(iii) TOTAL of contributions from individuals ▶		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs)		
(d) The Candidate	8.70	26.10
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8.70	26.10
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....		
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	8.70	26.10

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	8.70	26.10
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	8.70	26.10

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8.70
25. SUBTOTAL (add Line 23 and Line 24)	8.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 8

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 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)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STERNAD, JUSTIN L.

Mailing Address

19790 SW 101 AVENUE

City

State

Zip Code

CUTLER BAY

FL

33157-8607

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAMBEAN HOSPITALITY

Occupation

HOTEL AUDITOR

Receipt For: OPEN COMMITTEE 2012 CYCLE

☐ Primary ☐ General
☒ Other (specify)

Election Cycle-to-Date

26.10

Date of Receipt

 M M / D D / Y Y Y Y
 07 / 12 / 2013

Amount of Each Receipt this Period

8.70

Full Name (Last, First, Middle Initial)

B.

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
 / / /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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
 / / /

Amount of Each Receipt this Period

8.70

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

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 6 OF 8

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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)

LAMAR STERNAD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
07	12	2013

Amount of Each Disbursement this Period

8.70

A.
 USPS

 Mailing Address
 1300 WASHINGTON AVENUE

City	State	Zip Code
MIAMI BEACH	FL	33119

 Purpose of Disbursement
 POSTAGE

001

 Candidate Name
 JUSTIN LAMAR STERNAD

 Category/
 Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: OPEN COMMITTEE 2012 CYCLE

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY

Amount of Each Disbursement this Period

--

B.

Mailing Address

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)

Date of Disbursement

MM	DD	YYYY

Amount of Each Disbursement this Period

--

C.

Mailing Address

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)

TOTAL This Period (last page this line number only)

--

8.70

SCHEDULE C (FEC Form 3)
LOANS

PAGE 7 OF 8

 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)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

3.60

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3.60

TERMS

Date Incurred

 M M / D D / Y Y Y Y
 04 / 12 / 2012

Date Due

 M M / D D / Y Y Y Y
 ON / DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

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)..... ►

3.60

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 8 OF 8

 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)

LAMAR STERNAD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]

STERNAD, JUSTIN L.

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

19790 SW 101 AVE.

City

CUTLER BAY

State

FL

ZIP Code

33157-8607

Original Amount of Loan

25.00

Cumulative Payment To Date

0.75

Balance Outstanding at Close of This Period

24.25

TERMS

Date Incurred

 M M / D D / Y Y Y Y
 03 / 30 / 2012

Date Due

 M M / D D / Y Y Y Y
 ON / DEMAND

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

X

 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)..... ►

24.25

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

27.85

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