

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Consumers for Responsible Government

ADDRESS (number and street) **21600 Oxnard Street, Suite 600**
 Check if different than previously reported. (ACC) **Woodland Hills CA 91367**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00616011 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2017 through / / 2017

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 **Boucher, Ray, , ,**

Signature of Treasurer **Boucher, Ray, , ,** [Electronically Filed] Date / / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Consumers for Responsible Government

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text" value="395.10"/>	<input type="text" value="395.10"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="395.10"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="9188.58"/>	<input type="text" value="9188.58"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="9583.68"/>	<input type="text" value="9583.68"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9188.58"/>	<input type="text" value="9188.58"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="395.10"/>	<input type="text" value="395.10"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="10700.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Consumers for Responsible Government

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9188.58	9188.58
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9188.58	9188.58
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	9188.58	9188.58
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	9188.58	9188.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	9188.58	9188.58

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	9188.58	9188.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	9188.58	9188.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9188.58	9188.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9188.58	9188.58

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	9188.58	9188.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9188.58	9188.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9188.58	9188.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9188.58	9188.58

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Consumers for Responsible Government

A. Boucher, LLP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41926 Calle Californios
 City Lancaster State CA Zip Code 93536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9188.58

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2017
Transaction ID : PAYA51
 Amount of Each Receipt this Period
 196.70
 Memo Item
 In-kind Contribution; Legal & Reporting Services

B. Boucher, LLP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41926 Calle Californios
 City Lancaster State CA Zip Code 93536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9188.58

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : PAYA53
 Amount of Each Receipt this Period
 934.78
 Memo Item
 In-kind contribution; Legal & Reporting Services

C. Boucher, LLP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41926 Calle Californios
 City Lancaster State CA Zip Code 93536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 9188.58

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2017
Transaction ID : PAYA55
 Amount of Each Receipt this Period
 2233.10
 Memo Item
 In-kind Contribution; Legal & Reporting Services

SUBTOTAL of Receipts This Page (optional).....▶	3364.58
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Consumers for Responsible Government

A. Boucher, LLP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41926 Calle Californios

City Lancaster	State CA	Zip Code 93536
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9188.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : PAYA54

Amount of Each Receipt this Period
1003.00

Memo Item
In-kind Contribution; Legal & Reporting Services

B. Boucher, LLP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41926 Calle Californios

City Lancaster	State CA	Zip Code 93536
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9188.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : PAYA56

Amount of Each Receipt this Period
4162.11

Memo Item
In-kind Contribution; Legal & Reporting Services

C. Boucher, LLP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41926 Calle Californios

City Lancaster	State CA	Zip Code 93536
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9188.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2017

Transaction ID : PAYA52

Amount of Each Receipt this Period
418.00

Memo Item
In-kind Contribution; Legal & Reporting Services

SUBTOTAL of Receipts This Page (optional).....	5583.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Consumers for Responsible Government

A. Boucher, LLP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41926 Calle Californios

City Lancaster	State CA	Zip Code 93536
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9188.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2017

Transaction ID : PAYA57

Amount of Each Receipt this Period
113.00

Memo Item
In-kind Contribution; Legal & Reporting Services

B. Boucher, LLP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41926 Calle Californios

City Lancaster	State CA	Zip Code 93536
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9188.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2017

Transaction ID : PAYA58

Amount of Each Receipt this Period
127.89

Memo Item
In-kind Contribution; Legal & Reporting Services

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	240.89
TOTAL This Period (last page this line number only).....▶	9188.58

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Consumers for Responsible Government

Full Name (Last, First, Middle Initial)

A. Boucher, LLP

Mailing Address 41926 Calle Californios

City Lancaster State CA Zip Code 93536

Purpose of Disbursement In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2017

FEC Identification Number

C

Transaction ID : PAYB51

Amount of Each Disbursement this Period

196.70

Memo Item

Full Name (Last, First, Middle Initial)

B. Boucher, LLP

Mailing Address 41926 Calle Californios

City Lancaster State CA Zip Code 93536

Purpose of Disbursement In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2017

FEC Identification Number

C

Transaction ID : PAYB55

Amount of Each Disbursement this Period

2233.10

Memo Item

Full Name (Last, First, Middle Initial)

C. Boucher, LLP

Mailing Address 41926 Calle Californios

City Lancaster State CA Zip Code 93536

Purpose of Disbursement In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2017

FEC Identification Number

C

Transaction ID : PAYB56

Amount of Each Disbursement this Period

4162.11

Memo Item

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

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

6591.91

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Consumers for Responsible Government

Full Name (Last, First, Middle Initial)

A. Boucher, LLP

Mailing Address 41926 Calle Californios

City Lancaster State CA Zip Code 93536

Purpose of Disbursement
In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2017

FEC Identification Number

C []

Transaction ID : PAYB54

Amount of Each Disbursement this Period

[] 1003.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Boucher, LLP

Mailing Address 41926 Calle Californios

City Lancaster State CA Zip Code 93536

Purpose of Disbursement
In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2017

FEC Identification Number

C []

Transaction ID : PAYB52

Amount of Each Disbursement this Period

[] 418.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Boucher, LLP

Mailing Address 41926 Calle Californios

City Lancaster State CA Zip Code 93536

Purpose of Disbursement
In-kind contribution; Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2017

FEC Identification Number

C []

Transaction ID : PAYB53

Amount of Each Disbursement this Period

[] 934.78

Memo Item

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

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

[] 2355.78

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Consumers for Responsible Government

Full Name (Last, First, Middle Initial)

A. Boucher, LLP

Mailing Address 41926 Calle Californios

City Lancaster State CA Zip Code 93536

Purpose of Disbursement
In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 26 / 2017

FEC Identification Number

C

Transaction ID : PAYB57

Amount of Each Disbursement this Period

113.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Boucher, LLP

Mailing Address 41926 Calle Californios

City Lancaster State CA Zip Code 93536

Purpose of Disbursement
In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 26 / 2017

FEC Identification Number

C

Transaction ID : PAYB58

Amount of Each Disbursement this Period

127.89

Memo Item

Full Name (Last, First, Middle Initial)

C. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 24 / 2017

FEC Identification Number

C

Transaction ID : PAYBFT5151

Amount of Each Disbursement this Period

196.70

Memo Item

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

240.89

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Consumers for Responsible Government

Full Name (Last, First, Middle Initial)

A. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : PAYBFT5656

Amount of Each Disbursement this Period

[REDACTED] 4162.11

Memo Item

Full Name (Last, First, Middle Initial)

B. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : PAYBFT5555

Amount of Each Disbursement this Period

[REDACTED] 2233.10

Memo Item

Full Name (Last, First, Middle Initial)

C. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : PAYBFT5454

Amount of Each Disbursement this Period

[REDACTED] 1003.00

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Consumers for Responsible Government

Full Name (Last, First, Middle Initial)

A. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
In-kind Contribution; Legal & Reporting Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : PAYBFT5858

Amount of Each Disbursement this Period

[] 127.89 []

Memo Item

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:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[] []

Memo Item

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:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[] []

Memo Item

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

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

[] 0.00 []

[] 9188.58 []

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 17
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Consumers for Responsible Government

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Joe I. Perez			Nature of Debt (Purpose): Design for Mailer
Mailing Address 620 South Main Street, Suite 405			
City Los Angeles	State CA	Zip Code 90014	

Outstanding Balance Beginning This Period 1605.00		Transaction ID : PAYD38	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1605.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Joe I. Perez			Nature of Debt (Purpose): Design for Mailer
Mailing Address 620 South Main Street, Suite 405			
City Los Angeles	State CA	Zip Code 90014	

Outstanding Balance Beginning This Period 3745.00		Transaction ID : PAYD39	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3745.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Joe I. Perez			Nature of Debt (Purpose): Design for Mailer
Mailing Address 620 South Main Street, Suite 405			
City Los Angeles	State CA	Zip Code 90014	

Outstanding Balance Beginning This Period 2675.00		Transaction ID : PAYD40	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2675.00	

1) SUBTOTALS This Period This Page (optional)..... ▶	8025.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 17
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Consumers for Responsible Government

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Joe I. Perez			Nature of Debt (Purpose): Design for Mailer
Mailing Address 620 South Main Street, Suite 405			
City Los Angeles	State CA	Zip Code 90014	

Outstanding Balance Beginning This Period 2675.00	Transaction ID : PAYD41	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2675.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Olson Hagel & Fishburn, LLP			Nature of Debt (Purpose): Legal & Reporting Services
Mailing Address 555 Capitol Mall, Suite 1425			
City Sacramento	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 4403.00	Transaction ID : PAYD46	
Amount Incurred This Period - 4403.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Olson Hagel & Fishburn, LLP			Nature of Debt (Purpose): Legal & Reporting Services
Mailing Address 555 Capitol Mall, Suite 1425			
City Sacramento	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 1003.00	Transaction ID : PAYD47	
Amount Incurred This Period - 1003.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	2675.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 17
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Consumers for Responsible Government

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Olson Hagel & Fishburn, LLP			Nature of Debt (Purpose): Legal & Reporting Services
Mailing Address 555 Capitol Mall, Suite 1425			
City Sacramento	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 2233.10	Transaction ID : PAYD48	
Amount Incurred This Period - 2233.10	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Olson Hagel & Fishburn, LLP			Nature of Debt (Purpose): Legal & Reporting Services
Mailing Address 555 Capitol Mall, Suite 1425			
City Sacramento	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 614.70	Transaction ID : PAYD49	
Amount Incurred This Period - 614.70	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	10700.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	10700.00