# 20-6 · 09 · 06 · 0M · 00090000

**FEC** FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

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2016 SEP -6 AM 11: 42

Tor Other Than Air Authorized Committee	Office Use Only		
1. NAME OF TYPE OR PRINT ▼ Example: If typing, type over the lines.	12FE4M5		
Citizens Super Pacifor America			
ADDRESS (number and street) 19903, Santa Monica	Ste 548		
Check if different than previously reported. (ACC)  Check if different than previously reported. (ACC)	CA 902/2-		
2. FEC IDENTIFICATION NUMBER ▼ CITY ▲	STATE ▲ ZIP CODE ▲		
COCH96927 3. IS THIS NEW REPORT (N) OR	AMENDED (A)		
4. TYPE OF REPORT (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5)	(NON-Election Year Only)		
(a) Quarterly Reports: Mar 20 (M3) Jun 20 (M6)	Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)		
April 15 Apr 20 (M4) Jul 20 (M7)	Oct 20 (M10) Jan 31 (YE)		
Quarterly Report (Q1) (c) 12-Day Primary (12P)	General (12G) Runoff (12R)		
Quarterly Report (Q2)  Report for the:  Convention (12C)	Special (12S)		
October 15 Quarterly Report (Q3)	Y Y Y in the		
January 31 Year-End Report (YE)  Election on	State of		
July 31 Mid-Year Report (Non-election Year Only) (MY)  (d) 30-Day  POST-Election General (30G)  Report for the:	Runoff (30R) Special (30S)		
Termination Report (TER)	in the State of		
5. Covering Period OT 2012 through	25.76		
I certify that I have examined this Report and to the best of my knowledge and belief it is tr	ue, correct and complete.		
Type or Print Name of Treasurer 3idd 9 MUMII)			
Signature of Treasurer	Date 08 / 29 / 2075		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.			
Office Use	FEC FORM 3X Rev. 12/2004		

## 2016 · 09 · 06 · 03 · 0009&069

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name 01 01 7076 Report Covering the Period: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) ..... Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... 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) .....

## For further information contact:

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

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

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

# 2016 - 09 - 06 - 0M - 00098070

## **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

R	eport Covering the Period: From:	01 2016	то: 03/37/2016
	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)		
	(ii) Uniternized		1
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶		
	(b) Political Party Committees		
	(c) Other Political Committees		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	(such as PACs)		
	(d) Total Contributions (add Lines		<del></del>
	11(a)(iii), (b), and (c)) (Carry	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<del>~~~</del> / <del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>
	Totals to Line 33, page 5)▶		
12.	Transfers From Affiliated/Other		
	Party Committees		
13.	All Loans Received		
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	Loan Repayments Received		
15.	Offsets To Operating Expenditures	\	
	(Refunds, Rebates, etc.)	\(\tag{\tag{\tag{\tag{\tag{\tag{\tag{	/ <del></del>
	(Carry Totals to Line 37, page 5)		\/L
16.	Refunds of Contributions Made		Χ —————
	to Federal Candidates and Other	~~~~~~~/ <sub>4</sub>	\
	Political Committees	Lugue	
17.	Other Federal Receipts		
	(Dividends, Interest, etc.)	1	
18.	Transfers from Non-Federal and Levin Funds		\
	(a) Non-Federal Account	<del>//</del> _	<del></del>
	(from Schedule H3)	<u>L/</u>	
	(b) Levin Funds (from Schedule H5)		
	(c) Total Transfers (add 18(a) and 18(b))		
			\
19.	Total Receipts (add Lines 11(d),	<del></del>	<del></del>
	12, 13, 14, 15, 16, 17, and 18(c))▶	L_/	
20	Total Federal Receipts	/	
_0.	(subtract Line 18(c) from Line 19)▶		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	(Sabadot Ento 10/9) iistii Ento 10)		
			\

# 2016 - 09 - 06 - 0M - 00098071

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B** II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) Federal Share ..... (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures ..... (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .............▶ 22. Transfers to Affiliated/Other Party Committees..... Contributions to Federal Candidates/Committees and Other Political Committees...... 24. Independent Expenditures (use Schedule F)..... 26. Loan Repayments Made..... (b) Political Party Committees ..... (c) Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))......▶ 29. Other Disbursements ..... 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share ..... (ii) "Levin" Share..... (b) Federal Election Activity Paid Entirely With Federal Funds ..... (c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b))....▶ 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

### **DETAILED SUMMARY PAGE**

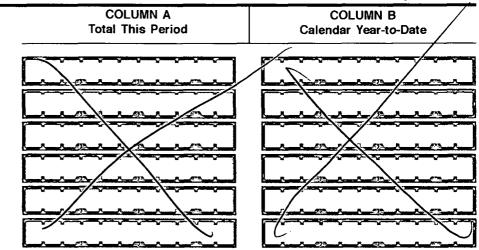
of Disbursements

Page 5

### III. Net Contributions/ **Operating Expenditures** 33. Total Contributions (other than loans) (from Line 11(d), page 3) ..... 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .......▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures

(subtract Line 37 from Line 36) ......

FEC Form 3X (Rev. 02/2003)



SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N		PAGE OF
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only c	one) 22 23 28a 28b	24 25 26 28c 29 30b
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NAME OF COMMITTEE (In Full) Coff Zens Super	s fac for	An	Unco	Jan Such Committee:
A. Halling Address Full Name (Last, First, Middle Initial)  Mailing Address	Barll	CA	Date of Disburseme	2016
City	State Zip Code			
Purpose of Disbursement Candidate Name		Category/ Type	Amount of Each Dis	sbursement this Period
Office Sought: House Disburser Senate President State: District:	ment For: Primary ☐ General Other (specify) ▼		Memo Item	
B. Mailing Address	D Bose	CA	Date of Disburseme	ent 20/6
Purpose of Disbursement  Candidate Name  Office Sought:   House   Disburser		Category/ Type	Amount of Each Di	sbursement this Period
Senate President State: District:	Primary General Other (specify)		Memo Item	
C. Full Name (Last, First Middle Initial)  Mailing Address	30 Barl	(	Date of Disburseme	2016
City	State Zip Code			
Purpose of Disbursement   Danie   Flet   Candidate Name		Category/ Type	Amount of Each Di	sbursement this Period
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SUBTOTAL of Disbursements This Page (optional)			ago anta o deserto esta e	
TOTAL This Period (last page this line number only				

## SCHEDULE B (FEC Form 3X)

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A. 	ailing Address	30 Bank	.CA	Date of Disbursement
C	ity	State Zip Code		
	urpose of Disbursement andidate Name		Category/	Amount of Each Disbursement this Period
	ffice Sought: House Disburse Senate President District:	ement For:  Primary General  Other (specify) ▼	Туре	Memo Item
В	Full Name (Last, First, Middle Initial)  B. Mailing Address  Mailing Address		Date of Disbursement	
ć	ity	State Zip Code		
Ĉ	Senate	ernent For:    Primary '   General	Category/ Type	Amount of Each Disbursement this Period  Memo Item
s	President District:	Other (specify)		
C. _	full Name (Last, First, Middle Initial)			Date of Disbursement
	Aailing Address			
	Dity	State Zip Code		
F	Purpose of Disbursement			Amount of Early St.
	Candidate Name  Office Sought:   House   Disburse	oment For	Category/ Type	Amount of Each Disbursement this Period
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