

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**
DO RIGHT BAYOU PAC

ADDRESS (number and street) **PO BOX 64845**
 Check if different than previously reported. (ACC) **BATON ROUGE LA 70896**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00635557 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.
CRATE, BRADLEY, T., ,
Type or Print Name of Treasurer

Signature of Treasurer CRATE, BRADLEY, T., , [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)

Write or Type Committee Name

DO RIGHT BAYOU PAC

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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="22770.73"/>	<input type="text" value="22770.73"/>
(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="22770.73"/>	<input type="text" value="22770.73"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10000.00"/>	<input type="text" value="10000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12770.73"/>	<input type="text" value="12770.73"/>
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="0.00"/>	

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

DO RIGHT BAYOU PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2017

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	22770.73	22770.73
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)).....▶	22770.73	22770.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	22770.73	22770.73

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
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)) ..	10000.00	10000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10000.00	10000.00

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
DO RIGHT BAYOU PAC

A. BOYCE, CLARK, G, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 HIGHLANDIA DR
 City BATON ROUGE State LA Zip Code 70810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOUISIANA MACHINERY COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt **06 / 07 / 2017**
Transaction ID : SA12.4139
 Amount of Each Receipt this Period 4600.00
 Memo Item
 JFC TRANSFER: GARRET GRAVES VICTORY FUND [SA12.4105]

B. CLINE, TREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20269 HIGHLAND RD
 City BATON ROUGE State CA Zip Code 70817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIVE S GROUP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt **05 / 18 / 2017**
Transaction ID : SA12.4137
 Amount of Each Receipt this Period 4600.00
 Memo Item
 JFC TRANSFER: GARRET GRAVES VICTORY FUND [SA12.4105]

C. FAVRE, ART, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 82285
 City BATON ROUGE State LA Zip Code 70884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONTRACTORS Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 17 / 2017**
Transaction ID : SA12.4135
 Amount of Each Receipt this Period 5000.00
 Memo Item
 JFC TRANSFER: GARRET GRAVES VICTORY FUND [SA12.4105]

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DO RIGHT BAYOU PAC

A. GARRET GRAVES VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 64845

City BATON ROUGE	State LA	Zip Code 70896
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FEC ID number of contributing federal political committee. **C** C00635565

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22770.73

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2017

Transaction ID : SA12.4105

Amount of Each Receipt this Period
22770.73

Memo Item
JFC TRANSFER: SEE MEMO ATTRIBUTIONS

B. HEARD, DANIEL, B, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3812 WILLOWICK

City HOUSTON	State TX	Zip Code 77019
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2017

Transaction ID : SA12.4141

Amount of Each Receipt this Period
4600.00

Memo Item
JFC TRANSFER: GARRET GRAVES VICTORY FUND [SA12.4105]

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

Mailing Address 1322 LEO DRIVE

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

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

Name of Employer (for Individual) THE NEUROMEDICAL CENTER	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2017

Transaction ID : SA12.4131

Amount of Each Receipt this Period
5000.00

Memo Item
JFC TRANSFER: GARRET GRAVES VICTORY FUND [SA12.4105]

SUBTOTAL of Receipts This Page (optional).....	22770.73
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 8 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DO RIGHT BAYOU PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCANLAN, JOHN, D, ,

Mailing Address 10440 SHADOW LAKE DR

City GEISMAR	State LA	Zip Code 70734
-----------------	-------------	-------------------

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

Name of Employer (for Individual) EATEL	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	17	/	2017

Transaction ID : SA12.4133

Amount of Each Receipt this Period
5000.00

Memo Item
JFC TRANSFER: GARRET GRAVES VICTORY FUND [SA12.4105]

B. 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	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

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	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	22770.73

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
DO RIGHT BAYOU PAC

A. BERGMANFORCONGRESS

Full Name (Last, First, Middle Initial)
BERGMANFORCONGRESS

Mailing Address N5070 CISCO LAKE ROAD

City WATERSMEET State MI Zip Code 49969

Purpose of Disbursement PRIMARY 2018 CONTRIBUTION

Candidate Name BERGMAN, JOHN, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MI District: 01

Date of Disbursement: 06 / 26 / 2017

FEC Identification Number: C00614214
Transaction ID : SB23.4127

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)
BRIAN MAST FOR CONGRESS

Mailing Address PO BOX 3016

City STUART State FL Zip Code 34995

Purpose of Disbursement PRIMARY 2018 CONTRIBUTION

Candidate Name MAST, BRIAN, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: FL District: 18

Date of Disbursement: 06 / 28 / 2017

FEC Identification Number: C00579896
Transaction ID : SB23.4108

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. DENHAM FOR CONGRESS

Full Name (Last, First, Middle Initial)
DENHAM FOR CONGRESS

Mailing Address 2150 RIVER PLAZA DR., #150

City SACRAMENTO State CA Zip Code 95833

Purpose of Disbursement PRIMARY 2018 CONTRIBUTION

Candidate Name DENHAM, JEFF, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 10

Date of Disbursement: 06 / 26 / 2017

FEC Identification Number: C00473272
Transaction ID : SB23.4111

Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4000.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
DO RIGHT BAYOU PAC

Full Name (Last, First, Middle Initial) A. MCSALLY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 26 / 2017
Mailing Address PO BOX 19128		FEC Identification Number C 000512236 Transaction ID : SB23.4114
City TUCSON	State AZ	Zip Code 85731
Purpose of Disbursement PRIMARY 2018 CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name MCSALLY, MARTHA, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AZ	District: 02	

Full Name (Last, First, Middle Initial) B. POLIQUIN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 26 / 2017
Mailing Address PO BOX 50		FEC Identification Number C 000518654 Transaction ID : SB23.4117
City OAKLAND	State ME	Zip Code 04963
Purpose of Disbursement PRIMARY 2018 CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name POLIQUIN, BRUCE L, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: ME	District: 02	

Full Name (Last, First, Middle Initial) C. RYAN COSTELLO FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 26 / 2017
Mailing Address PO BOX 3154		FEC Identification Number C 000554899 Transaction ID : SB23.4120
City WEST CHESTER	State PA	Zip Code 19381
Purpose of Disbursement PRIMARY 2018 CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name COSTELLO, RYAN A, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 06	

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

4000.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
DO RIGHT BAYOU PAC

A. WALTERS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 9070 IRVINE CENTER DRIVE, #150

City IRVINE State CA Zip Code 92618

Purpose of Disbursement
PRIMARY 2018 CONTRIBUTION

Candidate Name
WALTERS, MIMI, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: CA District: 45

Date of Disbursement
MM / DD / YYYY
06 / 13 / 2017

FEC Identification Number
C C00546853
Transaction ID : SB23.4123
Amount of Each Disbursement this Period
1000.00

Memo Item

B. WALTERS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 9070 IRVINE CENTER DRIVE, #150

City IRVINE State CA Zip Code 92618

Purpose of Disbursement
PRIMARY 2018 CONTRIBUTION

Candidate Name
WALTERS, MIMI, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: CA District: 45

Date of Disbursement
MM / DD / YYYY
06 / 26 / 2017

FEC Identification Number
C C00546853
Transaction ID : SB23.4126
Amount of Each Disbursement this Period
1000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

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

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)..... ▶

2000.00
10000.00