12030870115

FEC FORM 3

Only

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED

(Revised 02/2003)

1 Onim 0	For An A	Authorized Co	ommittee ——————————————————————————————————		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN	IT ▼	Example: If typing, tover the lines.	type 12FE4	M5 EC MAIL CENTER
FRIENDS (DIFI JANNIE	JACIOIB	S MOULT	RILE	
ADDRESS (number and stre	et) 12411115	SIMITIHI	CLIDIVIEL IR	ROAD	
Check if different					
than previously reported. (ACC)	- 4.5	MI GINITI	11665	<u> </u>	1,0,9,3,0-
2. FEC IDENTIFICATIO	ON NUMBER ▼	CITY		STATE A	ZIP CODE A STATE ▼ DISTRICT
C 0 0 5 2	959	3. IS THIS REPORT	NEW (N)	OR (A)	ENDED WY LIGH
4. TYPE OF REPOR (a) Quarterly Reports April 15 Quar	•	(b) 12-Day P	RE-Election Report 1	Genera	al (12G)
July 15 Quar	terly Report (Q2)		Convention (120		
October 15 C	Quarterly Report (Q3)	Election	on M / [,	in the State of
January 31 Y	ear-End Report (YE)	(c) 30-Day P	OST-Election Report	for the:	
Termination F	Report (TER)	Election		Runoff	
5. Covering Period	Ba 'II	' [ૣૺ૱૾ૺૣ૾૱	through	03'16	′ [¾8] Ž
I certify that I have examine Type or Print Name of Tre	1		•	ef it is true, correct	and complete.
Signature of Treasurer	Jane &	JE JAC peobs		Date	7 25 2612
NOTE: Submission of false,	erroneous, or incompl	ete information m	ay subject the person	signing this Report t	to the penalties of 2 U.S.C. §437g.
[1	1			EEC EODM 2

of Receipts and Disbursements

Write or Type Committee Name

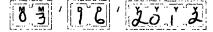
FRIENDS OF ANNE JACOBS MOULTRIE

Report Covering the Period:

From:



т.



COLUMN A COLUMN B This Period **Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions (other than loans) (from Line 11(e)) (b) Total Contribution Refunds (from Line 20(d)) (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) **Net Operating Expenditures** Total Operating Expenditures (frem Line 17) (b) Total Offeets to Operating Expenditures (from Line 14)..... (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of Reporting Period (from Line 27)..... 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:

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

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

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

FRIENDS OF ANNE MOULTRIE JACOBS

Report Covering the Period:

From:







To:







I. RECEIPTS

COLUMN A Total This Period

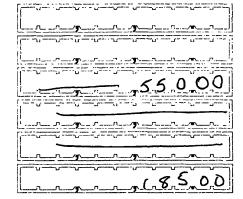
COLUMN B Election Cycle-to-Date

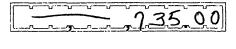
- 11. CONTRIBUTIONS (other than loans) FROM:
 - (a) Individuals/Persons Other Than **Political Committees**
 - (i) Itemized (use Schedule A)......
 - (ii) Unitemized
 - (iii) TOTAL of contributions from individuals
 - (b) Political Party Committees.....
 - (c) Other Political Committees (such as PACs)
 - (d) The Candidate
 - TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))...
- 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES
- 13. LOANS:

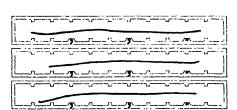
30870

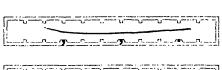
O

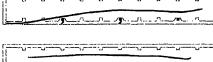
- Made er Guaranteed by the Candidate.....
- (b) All Other Loans.....
- (c) TOTAL LOANS
 - (add Lines 13(a) and (b)).....
- 14. OFFSETS TO OPERATING **EXPENDITURES** (Refunds, Rebates, etc.)
- 15. OTHER RECEIPTS (Dividends, Interest, etc.).....
- 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....



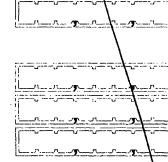


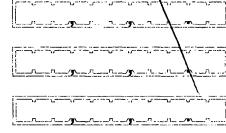












of Disbursements

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES		
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans		
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)	8,6,50,0,0	
III. CASH	SUMMARY	
23. CASH ON HAND AT BEGINNING OF RE	PORTING PERIOD	, , , , , , , , , , , , , , , , , , , ,
24 TOTAL RECEIPTS THIS PERIOD (from L	ine 16, page 3)	<u></u>
25. SUBTOTAL (add Line 23 and Line 24)		1.35.0u
26. TOTAL DISBURSEMENTS THIS PERIOD	(from Line 22)	
27. CASH ON HAND AT CLOSE OF REPOR (subtract Line 26 from Line 25)	TING PERIOD	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:					PAGE	OF	:	
(0	he	ck only	one)					
		11a	11b		11c	11d		
		12	13a		13b	14	\Box	15

T	EMIZED RECEIPTS	Detailed Summary Page		11a 12	\vdash	1	1b 3a	11c		11d	15
	y information copied from such Reports and Stateme for permittercial purposes, other than using the name					ırp	ose o	of solic			outions
/	NAME OF COMMITTEE (In Full)										
/	FRIENDS OF ANNE	TACIBS MOUTRIE									
	Full Name (Last, First, Middle Initial)	<u></u>									
A.	Mailing Address			Date of]/[Y -17 Y	/ 	Y
	City Sta	e Zip Code	 		<u></u>	Ŀ		<u> </u>			<u>!</u>
	FEC ID number of contributing federal political committee.		- 							Period	
	Name of Employer Occu	pation] [.5	n_i	√¹	/'AI_		<u> </u>
Receipt For: Primary General Other (specify) Election Cycle-to-Date											
_	Full Name (Last, First, Middle Initial)		1	Date of	Re	ce	eipt	4			
D.	Mailing Address			M u M] <i>'</i>		ם עם]′[γ . γ	/ U Y U	Y
	City Sta	e Zip Code			<u></u>						
	FEC ID number of contributing federal political committee.		\					•		Period	
	Name of Employer Occu	pation				.		v.m. , .	PAL		
	Primary General Other (spocify)	on Cycle-to-Date									
	Full Name (Last, First, Middle Initial)		,	Date of	Re	ece	int			_	
C.	Mailing Address		 				-]/[A - n- A	7 . 7 7	v
	City Sta	e Zip Code		m: 2- =	_1	Ľ:		=!! ii		r. Transil.	::='1
	FEC ID number of contributing federal political committee.							•		Period	
	Name of Employer Occu	pation			-11-	9 .		<u> </u>	^AJ		
	Receipt For: Primary General Other (specify)	on Cycle-to-Date									
s	UBTOTAL of Receipts This Page (optional)							-,,== <u>-</u> ,		- <u></u>	
TOTAL This Period (last page this line number only)					<u> </u>	- -,.:`	,,	;	T:_;:		

B.

City

State:

City

State:

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

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

C.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) for each category of the 19b 18 19a Detailed Summary Page 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 parameterial purposes, other than using the name and address of any political committee to solicit contributions from succ committee. NAME OF COMMITTEE (In Full) Full Name (Last, First, Middle Initial) Date of Disbursement ANNE JACOBS Zip Code (ひ9ろむ Amount of Each Disbursement this Period HIGHLAND MILLS 0000 Purpose of Disbursement WEBSITE Candidate Name Category/ JAWBS MOULTRIE ANNE Type Disbursement For: Office Sought: House Senate Primary General President Other (specify) District: 19 Full Name (Last, First, Middle Initial) Date of Disbursement / | D . D | / | A . A . A . A Mailing Address State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Primary General Senate Other (specify) President District: Full Name (Last, First, Middle Initial) Date of Disbursement M.M. / DO / YYYY Mailing Address State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House Senate **Primary** General Other (specify) President District:

<u> Lamin in Britani Baranda in Amiran Ber</u>

land
~ √I
O
-
ÇÇ
O
M
N

SCHEDULE C (FEC Form 3)

PAGE OF

DANS	for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) 13a
AME OF COMMITTEE (In Full)	
FRIENDS OF ANNE JACOBS	MOULTRIE
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: Primary
Mailing Address	General Other (specify) ▼
City State ZIP	Code
	To Date Balance Outstanding at Close of This Period
TERMS Date Incurred Date D	ue Interest Rate Secured:
List All Endorsers or Guarantors (if any) to Loan Source	Tes NO
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)	▶
FOTALS 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.

12050870122

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
FRIENDS OF ANNE JAWE	S MOULTRIE	
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
Full Name		` '
Mailing Address		ישישיין / [רפיעם] / ישישיין
l " t	Date Incurred or Established	
		MUM / DU / YUYUY
City State Zip Code	Date Due	
A. Has loan been restructured? No Yes	If yes, date originally incurred	, L.
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:	
C. Are other parties secondarily liable for the debt incur No Yes (Endorsers and guarantors m	red? ust be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	of deposit, chattel papers,	What is the value of this collateral?
No Yes If yes, specify:		
		Does the lender have a perfected security
		interest in it? No Yes
E. Are any future contributions or future receipts of intercollateral for the loan? No Yes If yes,	What is the estimated value?	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	
Date account established:	Address:	
MMJ/DDJ/YYYY	Oite Otate 7in	
الرحيدة السمية المساه	City, State, Zip:	
F. If neither of the types of collateral described above we exceed the loan amount, state the basis upon which	was pledged for this loan, or if the this loan was made and the bas	ne amount pledged does not equal or sis on which it assures repayment.
G. COMMITTEE TREASURER		DATE
Typed Name		MANAN / (DECENT) / [YOUY VYYYY]
Signature		
H. Attach a signed copy of the loan agreement.		
 I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the are accurate as stated above. 	terms of the loan and other infor	mation regarding the extension of the loan
II. The Joan was made on terms and conditions (in	ncluding interest rate) no more fa	vorable at the time than those imposed for
similar extensions of credit to other borrowers of III. This institution is aware of the requirement that complied with the requirements set forth at 11	a loan must be made on a basi	s which assures repayment, and has ing this loan.
AUTHØRIZED REPRESENTARVE		DATE
Typed Name		MANN / DOOD / (ANDARANA)
	tle	

SCHEDU	JLE	D	(FEC	Form	3)
DEBTS A	AND	OI	BLIGA	TIONS	}

(Use separate schedule(s) for each numbered line) PAGE OF
FOR LINE NUMBER:
(check only one) 9

cluding Loans	numbered line) (check only one) 9
AME OF COMMITTEE (In Full)	
FRIENDS OF ANNE JACOBS MONI	LTRIE
A. 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
B. 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	
Annual Insural This Period	Outstanding Policies of Olivin of This Posited
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
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	/
Do not This Dailed	Distance Delegate at Class of This Desired
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
SUBTOTALS This Period This Page (optional)	
TOTALS This Period (last page this line number only)	
, some page and me named only,	
TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page of	only) >

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

	Name of Principal Campaign Committee (In Full) Report Covering Period:							
vame	e of Principal Campaign		AS From		g Penoa.	l To:		
FR	RIENDS OF	ANNE JACO			/ [V V V V V V V V V 	I '-	7/777777	
	RIENDS OF	UE 		2 1	1 2012	0.3	12072	
		Committee	Name			(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees	
		· · · · · · · · · · · · · · · · · · ·						
3 C	olumn Total Last Page O	nly						
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. Total Contribut	·	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans	
Α								
В				1				
	(i) Line No. 13(c) Total Loans	(i) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. Total Othe Receip	r	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees	
A								
В								
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. Total Lo Repaym	oan	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees	
Α								
В		·	/	$^{\prime}$				
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. Total Disbursen		(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee	
Α								
В								
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) ^{,′} Line Nó. 6(c) Net Contributions	(cc) Line No. Net Oper Expendit	7(c) ating				
A								
В					<u> </u>			

Federal Election C ENVELOPE REPLACEMENT PAGE F The FEC added this page to the end of this	FOR INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or S	Signature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	-
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registration	Date of Receipt tion Office
Received from Senate Public Records Offi	Date of Receipt ce
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
July	8/1/16
PREPARER (3/2005)	DATE PREPARED
•	