

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
Paul Chabot Congress 2014

ADDRESS (number and street) 12223 Highland Avenue
106-228
 Check if different than previously reported. (ACC) Rancho Cucamonga CA 91739-2574

2. **FEC IDENTIFICATION NUMBER** ▼ C C00557884 CITY ▲ STATE ▲ ZIP CODE ▲
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE ▼ DISTRICT
CA 31

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 11 / 04 / 2014 in the State of CA

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 10 / 01 / 2014 through 10 / 15 / 2014

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 Kelly Lawler

Signature of Treasurer Kelly Lawler

[Electronically Filed]

Date

10 / 23 / 2014

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								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Paul Chabot Congress 2014

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2014 To: M M / D D / Y Y Y Y 10 / 15 / 2014

	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))....	32267	281100.65
(b) Total Contribution Refunds (from Line 20(d))	6224	6224
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	26043	274876.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	92940.67	332360.45
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	5974
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	92940.67	326386.45
8. Cash on Hand at Close of Reporting Period (from Line 27).....	76790.2	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	128650	

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)

Write or Type Committee Name

Paul Chabot Congress 2014

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).....	20199	157004.88
(ii) Unitemized.....	4568	28252.89
(iii) TOTAL of contributions from individuals ▶	24767	185257.77
(b) Political Party Committees.....	0	5000
(c) Other Political Committees (such as PACs).....	7500	78000
(d) The Candidate.....	0	12842.88
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	32267	281100.65
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	141500
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	141500
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	5974
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	32267	428574.65

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	92940.67	332360.45
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	8000	13200
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	8000	13200
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	6224	6224
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	6224	6224
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	107164.67	351784.45

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	151687.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	32267
25. SUBTOTAL (add Line 23 and Line 24).....	183954.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	107164.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	76790.2

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 31
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
Paul Chabot Congress 2014

A. Full Name (Last, First, Middle Initial)
John Crockett

Mailing Address 2521 Florida St. #2

City: Huntington Beach State: CA Zip Code: 92648

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

Name of Employer: None Occupation: Project Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **400**

Date of Receipt: 10 / 03 / 2014

Transaction ID : A-CF1311

Amount of Each Receipt this Period: **100**

B. Full Name (Last, First, Middle Initial)
Jerry Perenchio

Mailing Address 1999 Avenue Of The Stars Suite 3050

City: Los Angeles State: CA Zip Code: 90067-4613

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

Name of Employer: Chartwell Partners LLC Occupation: Businessman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **5200**

Date of Receipt: 10 / 06 / 2014

Transaction ID : A-CF1443

Amount of Each Receipt this Period: **2600**

C. Full Name (Last, First, Middle Initial)
Tatnall Hillman

Mailing Address 504 W Bleeker St

City: Aspen State: CO Zip Code: 81611

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **2600**

Date of Receipt: 10 / 04 / 2014

Transaction ID : A-CF1346

Amount of Each Receipt this Period: **2600**

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

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

5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 31
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

A. Full Name (Last, First, Middle Initial)
Marguerite Potter

Mailing Address 3581 Shore Lane
POB 2007

City Boca Grande State FL Zip Code 33921

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 08 / 2014

Transaction ID : A-CF1442

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Richard Uihlein

Mailing Address 1396 N Waukegan Rd

City Lake Forest State IL Zip Code 60045

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

Name of Employer Uline Occupation CEO/Ownery

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 06 / 2014

Transaction ID : A-CF1390

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
F. James Knittle

Mailing Address 151 Naomi Drive

City Ocean View State DE Zip Code 19970-9786

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF1526

Amount of Each Receipt this Period
500

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 31
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

A. Full Name (Last, First, Middle Initial)
Kevin Trax

Mailing Address 36814 Bay Hill Dr

City State Zip Code
Beaumont CA 92223

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

Name of Employer Occupation
County of San Bernardino Appraiser

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2014

Transaction ID : A-CF1469

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Murrey Seidner

Mailing Address 1949 Auto Centre Drive

City State Zip Code
Glendora CA 91740-6714

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

Name of Employer Occupation
Toyota of Glendora Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF1502

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Roger A Sands

Mailing Address 28977 Oakwood Lane

City State Zip Code
Highland CA 92346

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

Name of Employer Occupation
FUSD teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
M M / D D / Y Y Y Y
10 / 12 / 2014

Transaction ID : A-CF1455

Amount of Each Receipt this Period
200

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

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

2350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 31
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

A. Full Name (Last, First, Middle Initial)
William Bachschmidt

Mailing Address **PO BOX 1396**

City **Inglis** State **FL** Zip Code **34449**

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

Name of Employer **DAB CONSTRUCTORS<INC** Occupation **Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 02 / 2014

Transaction ID : A-CF1310

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
David J French

Mailing Address **W303N2568 Maple Avenue**

City **Pewaukee** State **WI** Zip Code **53072-4243**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **349**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF1500

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Delbert L Van Voorhis

Mailing Address **PO Box 87**

City **Colton** State **CA** Zip Code **92324-0087**

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

Name of Employer **D.L. Van Voorhis DDS** Occupation **Dentist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF1501

Amount of Each Receipt this Period
700

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

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

2450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

A. Full Name (Last, First, Middle Initial)
Lisa Korbatov

Mailing Address 624 north rodeo drive

City State Zip Code
beverly hills CA 90210

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

Name of Employer Occupation
fisch properties real estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : A-CF1448

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Monte r Davis Jr. Esq.

Mailing Address 9515 Banyan Street

City State Zip Code
Alta Loma CA 91737-2213

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

Name of Employer Occupation
Davis & Associates Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF1527

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Joe Miller

Mailing Address 103 Ferndale Ct.

City State Zip Code
Redlands CA 92374

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

Name of Employer Occupation
RE/MAX Advantage and RE/MAX Lakeside Business owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
10 / 01 / 2014

Transaction ID : A-CF1298

Amount of Each Receipt this Period
500

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 31
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

A. Full Name (Last, First, Middle Initial)
David J French

Mailing Address **W303N2568 Maple Avenue**

City **Pewaukee** State **WI** Zip Code **53072-4243**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **349**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF1514

Amount of Each Receipt this Period
99

B. Full Name (Last, First, Middle Initial)
Jerry Perenchio

Mailing Address **1999 Avenue Of The Stars Suite 3050**

City **Los Angeles** State **CA** Zip Code **90067-4613**

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

Name of Employer **Chartwell Partners LLC** Occupation **Businessman**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF1528

Amount of Each Receipt this Period
2600
 Primary Debt

C. Full Name (Last, First, Middle Initial)
Robert Stirling

Mailing Address **609 Valley view drive**

City **redlands** State **CA** Zip Code **92373**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **399**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF1475

Amount of Each Receipt this Period
300

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

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

2999.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 31
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

A. Full Name (Last, First, Middle Initial)
Paulette Nagle

Mailing Address 4338 N. Greenbrier Rd

City Long Beach State CA Zip Code 90808

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

Name of Employer Los Angeles County Teen Challenge Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2014

Transaction ID : A-CF1454

Amount of Each Receipt this Period
 250

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

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. Full Name (Last, First, Middle Initial)

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).....

250.00

20199.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 31
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

A. Full Name (Last, First, Middle Initial)
ISSA PAC

Mailing Address 8001 Irvine Center Drive
Suite 400

City Irvine State CA Zip Code 92618-2956

FEC ID number of contributing federal political committee. **C** C00450320

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF1503

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Jobs, Economy and Budget Fund

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF1504

Amount of Each Receipt this Period
5000

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

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).....

7500.00

7500.00

**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 13 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. Robert Porter		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 2439 Fremontia Drive		Amount of Each Disbursement this Period 280 Transaction ID : B-E-1458
City San Bernardino State CA Zip Code 92404-3938	Purpose of Disbursement Campaign Coordination Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Capital Campaigns Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 38 Executive Park Suite 390		Amount of Each Disbursement this Period 5309.21 Transaction ID : B-E-1279
City Irvine State CA Zip Code 92614-4730	Purpose of Disbursement Fundraising: Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Thomas Partners Strategies		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 1413 1/2 W Kenneth Road # 232		Amount of Each Disbursement this Period 10687.56 Transaction ID : B-E-1300
City Glendale State CA Zip Code 91201-1478	Purpose of Disbursement Mailer Printing, Design, Postage Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	16276.77
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 14 OF 31			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. Thomas Partners Strategies		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 1413 1/2 W Kenneth Road # 232		Amount of Each Disbursement this Period 4207.46
City Glendale State CA Zip Code 91201-1478	Purpose of Disbursement Edit and Score TV Spot, Robocalls	Transaction ID : B-E-1484
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Thomas Partners Strategies		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 1413 1/2 W Kenneth Road # 232		Amount of Each Disbursement this Period 24596.28
City Glendale State CA Zip Code 91201-1478	Purpose of Disbursement Design, Printing, Postage and Mailing	Transaction ID : B-E-1417
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jordan Kittleson		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 1005 N Center Avenue Apt. 6108		Amount of Each Disbursement this Period 1400
City Ontario State CA Zip Code 91764-5515	Purpose of Disbursement Strategic Consulting	Transaction ID : B-E-1291
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	30203.74
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 15 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 94014		Amount of Each Disbursement this Period 10000 Transaction ID : B-E-1481
City Palatine	State IL	
Zip Code 60094-4014	Purpose of Disbursement Credit Card Payment:See Memos	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 336.55 Transaction ID : B-E-1471
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Credit card processing fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Anthony Garcia		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2014
Mailing Address 12828 Ramona Boulevard Unit 56		Amount of Each Disbursement this Period 1417.36 Transaction ID : B-E-1379
City Baldwin Park	State CA	
Zip Code 91706-3658	Purpose of Disbursement Strategic Consulting and Mileage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	11753.91
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 16 OF 31			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. Probolsky Research		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 3990 Westerly Place Suite 185		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-1482
City Newport Beach	State CA	
Zip Code 92660-2304	Purpose of Disbursement Polling: Voter Tracking Survey	Category/ Type 005
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Tri Counties Bank		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 210 N Tehama Street		Amount of Each Disbursement this Period 30 Transaction ID : B-E-1542
City Willows	State CA	
Zip Code 95988-2834	Purpose of Disbursement Administrative/Salary/Overhead: Bank Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Probolsky Research		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 3990 Westerly Place Suite 185		Amount of Each Disbursement this Period 12500 Transaction ID : B-E-1230
City Newport Beach	State CA	
Zip Code 92660-2304	Purpose of Disbursement Polling: Voter Survey	Category/ Type 005
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	15530.00
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 17 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

A. Complete Campaigns

Full Name (Last, First, Middle Initial)
Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Credit card processing fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2014

Amount of Each Disbursement this Period: 181.25

Transaction ID : B-E-1307

Category/Type: 001

B. Complete Campaigns

Full Name (Last, First, Middle Initial)
Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Credit card processing fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 13 / 2014

Amount of Each Disbursement this Period: 37.6

Transaction ID : B-E-1474

Category/Type: 001

c. Thomas Partners Strategies

Full Name (Last, First, Middle Initial)
Mailing Address 1413 1/2 W Kenneth Road # 232

City Glendale State CA Zip Code 91201-1478

Purpose of Disbursement
Advertising: Printing, Mailing & Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 15 / 2014

Amount of Each Disbursement this Period: 12430

Transaction ID : B-E-1483

Category/Type: 004

SUBTOTAL of Disbursements This Page (optional) 12648.85

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 18 OF 31			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. eMotiv Marketing and Consulting		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 160 W Foothill Parkway # 105-28		Amount of Each Disbursement this Period 150 Transaction ID : B-E-1453
City Corona State CA Zip Code 92882-8545	Purpose of Disbursement Email Marketing Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 350 Transaction ID : B-E-1296
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Administrative/Salary/Overhead: Software Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 94014		Amount of Each Disbursement this Period 2572.45 Transaction ID : B-E-1480
City Palatine State IL Zip Code 60094-4014	Purpose of Disbursement Credit Card Payment:See Memos Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3072.45
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 19 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 1200 12th Avenue S Suite 1200		Amount of Each Disbursement this Period 56.26
City Seattle State WA Zip Code 98144-2734	Purpose of Disbursement Office supplies	Transaction ID : B-S-171
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Toby Keith I Love This Bar		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 12635 S Mainstreet		Amount of Each Disbursement this Period 1920
City Rancho Cucamonga State CA Zip Code 91739	Purpose of Disbursement Fundraising catering	Transaction ID : B-S-203
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
State: District:		

Full Name (Last, First, Middle Initial) c. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 233 S Wacker Drive		Amount of Each Disbursement this Period 466.7
City Chicago State IL Zip Code 60606-7147	Purpose of Disbursement Air travel	Transaction ID : B-S-204
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 20 OF 31			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. USP Fulfillment Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 9221 Charles Smith Avenue		Amount of Each Disbursement this Period 69.66
City Rancho Cucamonga State CA Zip Code 91730-5507	Purpose of Disbursement Postage and shipping	
Candidate Name	Category/Type 001	Transaction ID : B-S-206 [MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ralph's		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 7243 Haven Avenue		Amount of Each Disbursement this Period 402.54
City Rancho Cucamonga State CA Zip Code 91701-6063	Purpose of Disbursement Meals for volunteers	
Candidate Name	Category/Type 001	Transaction ID : B-S-195 [MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 12340 Highland Avenue		Amount of Each Disbursement this Period 100.66
City Rancho Cucamonga State CA Zip Code 91739-1578	Purpose of Disbursement Fuel for district travel	
Candidate Name	Category/Type 002	Transaction ID : B-S-197 [MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 21 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. Southwest Airline		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 2702 Love Field Drive		Amount of Each Disbursement this Period 221.7
City Dallas State TX Zip Code 75235-1908	Purpose of Disbursement Air travel	
Candidate Name	Category/Type 002	Transaction ID : B-S-199 [MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Home Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 11884 Foothill Boulevard		Amount of Each Disbursement this Period 319.79
City Rancho Cucamonga State CA Zip Code 91730-3900	Purpose of Disbursement Sign supplies	
Candidate Name	Category/Type 006	Transaction ID : B-S-189 [MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Icon Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 801 28th Street		Amount of Each Disbursement this Period 1582.22
City Bakersfield State CA Zip Code 93301-2562	Purpose of Disbursement Printed material	
Candidate Name	Category/Type 001	Transaction ID : B-S-190 [MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 22 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. Enterprise Rent-A-Car		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 9849 Foothill Boulevard Suite F		Amount of Each Disbursement this Period 1383.22
City Rancho Cucamonga	State CA	Zip Code 91730-3681
Purpose of Disbursement Campaign car rental	002 Category/Type	
Candidate Name		Transaction ID : B-S-185
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Corner Bakery		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 402 Orange Street		Amount of Each Disbursement this Period 81.66
City Redlands	State CA	Zip Code 92374-3206
Purpose of Disbursement Campaign meals	001 Category/Type	
Candidate Name		Transaction ID : B-S-179
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Mexico Cafe		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 892 E Highland Avenue		Amount of Each Disbursement this Period 249.5
City San Bernardino	State CA	Zip Code 92404-4048
Purpose of Disbursement Campaign meals	001 Category/Type	
Candidate Name		Transaction ID : B-S-202
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 23 OF 31			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. Wal Mart		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 1120 S Mount Vernon Avenue		Amount of Each Disbursement this Period 433.28
City Colton State CA Zip Code 92324-4220	Purpose of Disbursement Office supplies	Transaction ID : B-S-208
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
State: District:		

Full Name (Last, First, Middle Initial) B. California Outdoor Graphics		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 3309 S Main Street		Amount of Each Disbursement this Period 1333.8
City Santa Ana State CA Zip Code 92707-4406	Purpose of Disbursement Advertising	Transaction ID : B-S-172
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Cardmember Service(10/10/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 408
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Credit card processing fees	Transaction ID : B-E-1449
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	408.00
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 24 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. The KAL Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2014
Mailing Address 976 Pacific Avenue		Amount of Each Disbursement this Period 1416.53 Transaction ID : B-E-1378
City Willows State CA Zip Code 95988-9788	Purpose of Disbursement Bookkeeping Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. SCM Enterprises LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 203 S Union Street Suite 300		Amount of Each Disbursement this Period 1600 Transaction ID : B-E-1445
City Alexandria State VA Zip Code 22314-3356	Purpose of Disbursement Fundraising: Email deployment Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
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).....	3016.53
TOTAL This Period (last page this line number only).....	92910.25

**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 25 OF 31	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. Dr. Paul R Chabot		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 12223 Highland Avenue # 106-228		Amount of Each Disbursement this Period 8000
City Rch Cucamonga State CA Zip Code 91739-2574	Purpose of Disbursement Loan Repayment Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : B-R-2
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
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) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
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).....	8000.00
TOTAL This Period (last page this line number only).....	8000.00

**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 26 OF 31	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

Full Name (Last, First, Middle Initial) A. Kenneth Gerenraich		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 25166 Rockridge Road		Amount of Each Disbursement this Period 600 Transaction ID : B-E-1444
City Laguna Hills	State CA Zip Code 92653	
Purpose of Disbursement Return duplicate contribution	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Dr. Paul R Chabot		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 12223 Highland Avenue # 106-228		Amount of Each Disbursement this Period 5624 Transaction ID : B-E-1293
City Rch Cucamonga	State CA Zip Code 91739-2574	
Purpose of Disbursement Refund of Inkind of Ballot Fees	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
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).....	6224.00
TOTAL This Period (last page this line number only).....	6224.00

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Paul Chabot Congress 2014** Transaction ID : **SC/10-L3**

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Paul R Chabot	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 12223 Highland Avenue # 106-228		
City Rch Cucamonga	State CA	ZIP Code 91739-2574

Original Amount of Loan 62000	Cumulative Payment To Date 13200	Balance Outstanding at Close of This Period 48800
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TERMS	Date Incurred M 03 / D 06 / Y 2014	Date Due M / D / Y 12/31/2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....	▶	48800.00
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

NAME OF COMMITTEE (In Full) **Paul Chabot Congress 2014** Transaction ID : **SC/10-L4**

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Paul R Chabot	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 12223 Highland Avenue # 106-228		
City Rch Cucamonga	State CA	ZIP Code 91739-2574

Original Amount of Loan 4500	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period 4500
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TERMS

Date Incurred M 05 / D 29 / Y 2014	Date Due M / D / Y 12/31/2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....	▶	4500.00
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

NAME OF COMMITTEE (In Full) **Paul Chabot Congress 2014** Transaction ID : **SC/10-L5**

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Paul R Chabot	[PERSONAL FUNDS]	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 12223 Highland Avenue # 106-228		
City Rch Cucamonga	State CA	ZIP Code 91739-2574

Original Amount of Loan 75000	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period 75000
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TERMS

Date Incurred M: 09 / D: 23 / Y: 2014	Date Due M: / D: / Y: 12/31/2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....	75000.00
TOTALS This Period (last page in this line only).....	128300.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Paul Chabot Congress 2014

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cardmember Service	Nature of Debt (Purpose): Administrative/Salary/Overhead: Credit Card Payment: See Memos
Mailing Address PO Box 94014	
City State Zip Code Palatine IL 60094-4014	

Outstanding Balance Beginning This Period 12572.45	Transaction ID : SD10-DEBT1481	
Amount Incurred This Period 0	Payment This Period 12572.45	Outstanding Balance at Close of This Period 0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ryan Hall	Nature of Debt (Purpose): Administrative/Salary/Overhead: Media Consulting
Mailing Address 306 N Janss Street	
City State Zip Code Anaheim CA 92805-2525	

Outstanding Balance Beginning This Period 350	Transaction ID : SD10-DEBT1226	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 350

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital Campaigns Inc.	Nature of Debt (Purpose): Fundraising: Fundraising Consulting
Mailing Address 38 Executive Park Suite 390	
City State Zip Code Irvine CA 92614-4730	

Outstanding Balance Beginning This Period 5309.21	Transaction ID : SD10-DEBT1279	
Amount Incurred This Period 0	Payment This Period 5309.21	Outstanding Balance at Close of This Period 0

1) SUBTOTALS This Period This Page (optional)	350.00
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 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Paul Chabot Congress 2014

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Probolsky Research

Nature of Debt (Purpose):
Polling: Voter Tracking Survey

Mailing Address 3990 Westerly Place
Suite 185

City State Zip Code
Newport Beach CA 92660-2304

Outstanding Balance Beginning This Period

15500

Transaction ID : SD10-DEBT1482

Amount Incurred This Period

0

Payment This Period

15500

Outstanding Balance at Close of This Period

0

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

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 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) ▶

0.00

350.00

128300.00

128650.00