

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2017 DEC 11 11:57

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

COMCO DEMOCRATS

ADDRESS (number and street)

1385 BLOOM ST



Check if different than previously reported. (ACC)

COMCO CA 95528

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00455352

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



Primary (12P)



General (12G)



Runoff (12R)

PRE-Election Report for the:



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

(d)

30-Day



General (30G)



Runoff (30R)



Special (30S)

POST-Election Report for the:

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

5. Covering Period

07 / 01 / 2016

09 / 30 / 2016

through

09 / 30 / 2016

11 / 30 / 2016

11 / 30 / 2016

11 / 30 / 2016

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

MICHAEL HAWKINS

Signature of Treasurer

Michael Hawkins

Date

11 / 25 / 2017

11 / 25 / 2017

11 / 25 / 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.

Office Use Only									
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FEC FORM 3X
Rev. 05/2016

2017-12-01 10:00:00

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Colico Democrats

Report Covering the Period:

From:

07 / 01 / 2014

To:

09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		3042.43
(b) Cash on Hand at Beginning of Reporting Period.....	5428.14	
(c) Total Receipts (from Line 19).....	7534.01	81787.27
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	12962.17	20929.20
7. Total Disbursements (from Line 31).....	5528.24	13785.29
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	7434.91	7434.91
9. 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).....	-	



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

2017-12-01 00:00:00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	1,023.-	3,684.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1,023.-	3,684.07
22. Transfers to Affiliated/Other Party Committees	-	1,600.-
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)	9,086.9	9,086.9
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. 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 28(a), (b), and (c))		
29. Other Disbursements (Including Non-Federal Donations)	-	29,284.4
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds	3,594.57	5,804.57
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	3,594.57	5,804.57
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	55,282.4	1,348,579
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	55,282.4	1,348,579

NON-FEDERAL DONATIONS

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)	7439.61	15248.33
34. Total Contribution Refunds (from Line 28(d))	-	-
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7439.61	15248.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1023.00	3684.07
37. Offsets to Operating Expenditures (from Line 15, page 3)	-	-
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1023.00	3684.07

CONFIDENTIAL

**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)
 11a 11b 11c 12
 13 14 15 16 17
 PAGE 6 OF 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)
CHICO Democrats

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

A. **CANNON DEBRA**

Mailing Address
263 HILLVIEW WY

City **CHICO** State **CA** Zip Code **95926**

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

Name of Employer (for Individual) **Lolo's** Occupation (for Individual) **Principal**

Receipt For:
 Primary General
 Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt
09 / 28 / 2016

Amount of Each Receipt this Period
500.00

Memo Item

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

B. **DAVIS Jacob**

Mailing Address
2521 Zanella Ln

City **CHICO** State **CA** Zip Code **95528**

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

Name of Employer (for Individual) **Drafted for Athlete** Occupation (for Individual) **Principal**

Receipt For:
 Primary General
 Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt
09 / 22 / 2016

Amount of Each Receipt this Period
1000.00

Memo Item

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

C. **MARTIN JAMES**

Mailing Address
1728 14 CHERRY ST

City **CHICO** State **CA** Zip Code **95926**

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

Name of Employer (for Individual) **ACCESS LEGAL SERVICE** Occupation (for Individual) **Principal**

Receipt For:
 Primary General
 Other (specify) Aggregate Year-to-Date **200.00**

Date of Receipt
09 / 21 / 2016

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional) **1700.00**

TOTAL This Period (last page this line number only) **4300.00**

2016-11-01 10:00:00 AM

**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)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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PAGE 7 OF 13

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NAME OF COMMITTEE (In Full)
CHICO DEMOCRATS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. **WILSON, PENNY**

Mailing Address
P.O. BOX 3323

City **CHICO** State **CA** Zip Code **95927**

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

Name of Employer (for Individual) **Self** Occupation (for Individual) **Retired**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **6790.00**

Date of Receipt
08 / 23 / 2016

Amount of Each Receipt this Period
1500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
3. **BRENNAN, Richard**

Mailing Address
Box Broadway Dr L4

City **CHICO** State **CA** Zip Code **95926**

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

Name of Employer (for Individual) **Self** Occupation (for Individual) **Retired**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **290.00**

Date of Receipt
09 / 21 / 2016

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address
P.O. BOX 4399

City **CHICO** State **CA** Zip Code **95927**

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

Name of Employer (for Individual) **Self** Occupation (for Individual) **Financial Investigator**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **200.00**

Date of Receipt
09 / 30 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional) **600.00**

TOTAL This Period (last page this line number only)

2016-09-01 10:00:00

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

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

FOR LINE NUMBER: PAGE 8 OF 13
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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

NAME OF COMMITTEE (In Full)
CHICO DEMOCRATS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Belcett, William

Mailing Address
99 ALMA BLUFF AVE

City **CHICO** State **CA** Zip Code **95926**

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

Name of Employer (for Individual) **Self** Occupation (for Individual) **Builder**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4500.00**

Date of Receipt
08 / 25 / 2016

Amount of Each Receipt this Period
400.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Stewart, William

Mailing Address
1636 MEADOW DR

City **CHICO** State **CA** Zip Code **95926**

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

Name of Employer (for Individual) **Self** Occupation (for Individual) **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt
09 / 27 / 2016

Amount of Each Receipt this Period
500.00

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional) **700.00**

TOTAL This Period (last page this line number only)

2016-12-01 10:00:00 AM

**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)

21b 22 23 26 27
 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

Crucio Democrats

Full Name (Last, First, Middle Initial)

A. *Hubbards, Michael*

Mailing Address

1355 B 10th St

City

Crucio

State

CA

Zip Code

95928

Purpose of Disbursement

Postage

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

08 / 28 / 2011

FEC Identification Number

C

Amount of Each Disbursement this Period

688.00

Memo Item

Full Name (Last, First, Middle Initial)

B. *Hubbards, Michael*

Mailing Address

1355 B 10th St

City

Crucio

State

CA

Zip Code

95928

Purpose of Disbursement

Postage

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

09 / 10 / 2011

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. *BOB MULHOLLAND*

Mailing Address

PO Box 4924

City

Crucio

State

CA

Zip Code

95927

Purpose of Disbursement

*DOOR HANGERS
ADVERTISING EXPENSE*

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

08 / 26 / 2011

FEC Identification Number

C

Amount of Each Disbursement this Period

276.51

Memo Item

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

1064.51

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

2872.01

2011-12-01 09:00:00

**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)

21b 22 23 26 27
 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
CHICO Democrats

A. Full Name (Last, First, Middle Initial)
Creenture type

Mailing Address
3010 ALAMO AVE

City
CHICO State
CA Zip Code
95573

Purpose of Disbursement
Graphic Design

Candidate Name
[Redacted] Category/Type
[Redacted]

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) Memo Item

Date of Disbursement
09 / 12 / 2014

FEC Identification Number
C

Amount of Each Disbursement this Period
389.00

State: District:

3. Full Name (Last, First, Middle Initial)
Mrs Signs

Mailing Address
[Redacted]

City
[Redacted] State
[Redacted] Zip Code
[Redacted]

Purpose of Disbursement
Signs/Display

Candidate Name
[Redacted] Category/Type
[Redacted]

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) Memo Item

Date of Disbursement
09 / 10 / 2014

FEC Identification Number
C

Amount of Each Disbursement this Period
213.68

State: District:

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

Mailing Address
8910 BETHY LEO LN

City
SACRAMENTO State
CA Zip Code
95811

Purpose of Disbursement
Mailing

Candidate Name
[Redacted] Category/Type
[Redacted]

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) Memo Item

Date of Disbursement
09 / 16 / 2014

FEC Identification Number
C

Amount of Each Disbursement this Period
604.42

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶ **1,207.10**

TOTAL This Period (last page this line number only).....▶ **[Redacted]**

2014-10-10 10:00:00 AM

**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)

21b 22 23 26 27
 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
Chicago Democrats

A.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name **Prabir Mukherjee** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address **PO Box 5214**

City **Chicago** State **IL** Zip Code **95927**

Purpose of Disbursement

Candidate Name **Prabir Mukherjee** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period **224.50**

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ **727.50**

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

2014-11-01 10:00:00 AM

**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)						PAGE 12 OF 15
	<input checked="" type="checkbox"/> 21b 28a	<input type="checkbox"/> 22 28b	<input type="checkbox"/> 23 28c	<input type="checkbox"/> 26 29	<input type="checkbox"/> 27 30b		

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

NAME OF COMMITTEE (In Full)
Conzo Democrats

A.

Full Name (Last, First, Middle Initial)
ARMEDA FERRARI

Date of Disbursement
05 / 12 / 2016

Mailing Address
21 Dominion Dr

City
CAICO State
CA Zip Code
95973

Purpose of Disbursement
Seasonal OFFICER Rent

Candidate Name
Category/Type

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

State: District:

FEC Identification Number
C

Amount of Each Disbursement this Period
1,020.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... **1,020**

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

2017-12-01 10:00 AM

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE **12** OF **12**
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Citico Democrats		FEC IDENTIFICATION NUMBER 00455352
Check if <input type="checkbox"/> 24-hour report	<input type="checkbox"/> 48-hour report	<input checked="" type="checkbox"/> New report
Amends report filed on		09 / 10 / 2016

Full Name of Payee H + S Signs		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 10 / 2016
Mailing Address			Amount 812.69
City	State	Zip Code	Date of Disbursement or Obligation 09 / 15 / 2016
Purpose of Expenditure Signs display		Category/Type	
Name of Federal Candidate: Hillary Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 90869		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Creative Type		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 17 / 2016
Mailing Address 3010 ALAMO AVE			Amount 95.00
City	State	Zip Code	Date of Disbursement or Obligation 09 / 15 / 2016
Purpose of Expenditure Signs - Design		Category/Type	
Name of Federal Candidate: HILLARY CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 90869		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	90869
(a) SUBTOTAL of Unitemized Independent Expenditures	00
(a) TOTAL Independent Expenditures	90869

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

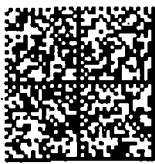
Signature Michael Hewson

Date **09 / 10 / 2016**

2016-10-10 10:00:00 AM

UNITED STATES POSTAL SERVICE

U.S. POSTAGE
\$6.65
PM 2-DAY
95926 0006
Date of sale
11/25/17
06 2500
88227 1260277 7
08259800



P

PRIORITY MAIL 2-DAY®

EXPECTED DELIVERY 11/28/2017

SHIP TO:

0006

WASHINGTON DC 20463

USPS TRACKING NUMBER



9505 5000 3287 7329 0000 69

US FORMS DECLARATION LABEL MAY BE REQUIRED.

RECEIVED
MAIL CENTER
C-1
2017

PRESS FIRMLY TO SEAL

PRIORITY MAIL
POSTAGE REQU

FROM:

Chico Democrats
P.O. Box 4924
Chico, CA 95927

TO:

FEDERAL Election Comm
999 E STREET NW
Washington, DC 20443



VISIT US AT USPS.COM®



EPI4F July 2013



This envelope is made from post-consumer waste. Please recycle - again.

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS First Class Mail	Postmarked	Date of Receipt
--	------------	-----------------

<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
--	------------------

<input checked="" type="checkbox"/> USPS Priority Mail	Postmarked 11/25/2017
--	--------------------------

<input type="checkbox"/> USPS Priority Mail Express	Postmarked
---	------------

<input type="checkbox"/> Postmark Illegible	
---	--

<input type="checkbox"/> No Postmark	
--------------------------------------	--

<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
--	-----------------

<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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<i>mf</i> PREPARER	12/1/2017 DATE PREPARED
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