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Image# 201607129020408380

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	or Other Than A	An Authorized	Committe	е		Office Use Only	
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		mple: If typing the lines.	g, type	12FE4M5		
California Association of	of Marriage & F	Family Thera	pists PAC	<u>,</u>			
ADDRESS (number and street)	555 Capitol Mall, S	uite 1425					
Check if different than previously reported. (ACC)	Sacramento				CA	95814	-
2. FEC IDENTIFICATION NU	MBER ▼	CITY ▲			STATE 🛦	ZIP C	ODE 🛦
C C00346619		3. IS THIS REPORT	× N	EW I) OR	AN (A)	1ENDED	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Quarterly Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	(c) 12-Day PRE-Ele Report for (d) 30-Day	ction or the: Election on	Jı	2C)	Sep	in the	Special (30S)
5. Covering Period 05	19	2016	through	06_	30 /	2016]
I certify that I have examined this Type or Print Name of Treasurer	Ron Hynum	best of my know	wiedge and b	eliet it is tru	ue, correct and	a complete.	
Signature of Treasurer Ron H	ynum		[Electronically	Filed] [Date 07	/ 08 /	2016
NOTE: Submission of false, errone	ous, or incomplete in	nformation may su	bject the person	on signing t	his Report to th	ne penalties of 2	U.S.C. §437g.
Office Use Only						FEC FO Rev. 12	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

California Association of Marriage & Family Therapists PAC

Report Covering the Period: From: 05 | 19 | 2016 | To: 06 | 30 | 2016

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		102257.83
	(b) Cash on Hand at Beginning of Reporting Period	93188.28	
	(c) Total Receipts (from Line 19)	4162.48	18172.93
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	97350.76	120430.76
7.	Total Disbursements (from Line 31)	250.00	23330.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	97100.76	97100.76
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

California Association of Marriage & Family Therapists PAC

	COLUMN A	COLUMN B		
I. Receipts	Total This Period	Calendar Year-to-Date		
. Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees	250.00	F00.00		
(i) Itemized (use Schedule A)	230.00	500.00		
(ii) Unitemized	3197.03	10145.13		
(iii) TOTAL (add	7	7		
Lines 11(a)(i) and (ii)▶	3447.03	10645.13		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	3447.03	10645.13		
2. Transfers From Affiliated/Other	7	7		
Party Committees	0.00	0.00		
,	7 7 7			
B. All Loans Received	0.00	0.00		
1. Loan Repayments Received	0.00	0.00		
5. Offsets To Operating Expenditures		7		
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
6. Refunds of Contributions Made				
to Federal Candidates and Other	0.00	0.00		
Political Committees	0.00	0.00		
7. Other Federal Receipts (Dividends, Interest, etc.)	745.45	7527.80		
(Dividends, Interest, etc.)	715.45	1321.00		
(a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
, , , , , , , , , , , , , , , , , , , ,				
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))	4162.48	18172.93		
). Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	4162.48	18172.93		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Operating Expenditures: – (a) Allocated Federal/Non-Federal				
Activity (from Schedule H4)	0.00	0.00		
(i) Federal Share				
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	0.00	0.00		
Expenditures(c) Total Operating Expenditures	0.00	0.00		
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00		
. Transfers to Affiliated/Other Party				
Committees Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	0.00	18080.00		
Independent Expenditures				
(use Schedule E)	0.00	0.00		
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00			
(use Schedule F)	0.00	0.00		
. Loan Repayments Made	0.00	0.00		
Loans Made Refunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	250.00	250.00		
man Fontical Committees	200.00	10000		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	250.00	250.00		
		5000.00		
Other Disbursements	0.00	5000.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)	0.00	2.22		
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely				
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	250.00	23330.00		
Total Coderal Dishurance to				
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	250.00	23330.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	3447.03	10645.13
For the contribution Refunds (from Line 28(d))	250.00	250.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3197.03	10395.13
i. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

	FO	R LINE	NU	MBER	:	PAGE	6	OF	8	
Use separate schedule(s)	(che	eck only	or or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c	12	:		
		13		14		15	16	, [1·	7

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	
NAME OF COMMITTEE (In Full) California Association of Mar	riage & Family Therapists PAC	
Full Name (Last, First, Middle Initial) Robin Reinke Mailing Address 1555 Pearl Heights Road		Date of Receipt
City	State Zip Code	05 31 2016 Transaction ID : INCA6040
Vista FEC ID number of contributing federal political committee.	CA 92081-8809	Amount of Each Receipt this Period 250.00
Name of Employer Robin Reinke, LMFT Receipt For: Primary General Other (specify) ▼	Occupation Licensed Marriage and Family Therapist Aggregate Year-to-Date ▼ 25.00	Memo Item
Full Name (Last, First, Middle Initial) - Mailing Address	ı	Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	l)	250.00
TOTAL This Period (last page this line num	<u>· </u>	250.00

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SCHEDULE A (FEC Form 3	K)	te schedule(s)	FOR LINE NUMBER: PAGE 7 OF 8					
ITEMIZED RECEIPTS	for each cat	for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 🗙 1					
or for commercial purposes, other than usin			person for the purpose of soliciting contributions be to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) California Association of Ma	riage & Family Therap	ists PAC						
Full Name (Last, First, Middle Initial) Dunham Trust Company			Date of Receipt					
Mailing Address 10251 Vista Sorrento Pa Suite 200			05 31 / Y = Y = Y = Y					
City San Diego	State Zip Code CA 92121		Transaction ID : INCA6032 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		443.33					
Name of Employer	Occupation		Change in Investment Value					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	2527.80						
Full Name (Last, First, Middle Initial) Dunham Trust Company			Date of Receipt					
Mailing Address 10251 Vista Sorrento Pa Suite 200			06 30 2016					
City San Diego	State Zip Code CA 92121		Transaction ID : INCA6175 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		272.12					
Name of Employer	Occupation		Change in Investment Value					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	2527.80						
Full Name (Last, First, Middle Initial)			Date of Receipt					
Mailing Address			M = M / D = D / Y = Y = Y					
City	State Zip Code		Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		Amount of Each Fledept this Feriod					
Name of Employer	Occupation		Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼							
SUBTOTAL of Receipts This Page (options	1)		715.45					

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

715.45

SCHEDULE B (FEC Form 3X)	Hee consists askedular()	FOR LINE NUMBER: PAGE 8 C				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	ory of the		24 25 26		
	Detailed Suffiffiary Page	27	X 28a 28b	28c 29 30		
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan	ments may not be sold or use ne and address of any politic	ed by any persoal committee to	on for the purpose of solicit contributions	of soliciting contributions from such committee.		
NAME OF COMMITTEE (In Full)	, ps					
California Association of Marriage	& Family Therapists	PAC				
Full Name (Last, First, Middle Initial)			Date of Disburse	ment		
A. Robin Reinke			M M / D			
Mailing Address 1555 Pearl Heights Road			06 2	2016		
City Vista	State Zip Code CA 92081-8809		Transaction ID	: EXPB6078		
Purpose of Disbursement	32001-0009					
Refund of Contribution Candidate Name		010	Amount of Each	Disbursement this Period		
Candidate manie		Category/ Type		250.00		
	ment For:		Memo Item			
Senate President	Primary General Other (specify) ▼					
State: District:	· · · · · · · · · · · · · · · · · · ·					
Full Name (Last, First, Middle Initial) B.			Date of Disburse	ment		
			M M / D			
Mailing Address						
City	State Zip Code					
Purpose of Disbursement			A	Dishara and the Dishara		
Candidate Name		Cotoros	Amount of Each	Disbursement this Period		
		Category/ Type		7		
Office Sought: House Disburser Senate	ment For: Primary General		Memo Item			
President	Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial) C.			Date of Disburse	ment		
			M M / D M	D / Y Y Y Y Y		
Mailing Address						
City	State Zip Code					
Purpose of Disbursement						
Condidate Name			Amount of Each	Disbursement this Period		
Candidate Name		Category/ Type				
	ment For:	71: -	Memo Item	7		
Senate President	Primary General Other (specify) ▼		_			
State: District:	Other (specify)					
1				252.00		
SUBTOTAL of Disbursements This Page (optional)		·····•		250.00		
TOTAL This Period (last page this line number only))			250.00		