

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
CAPG FEDERAL PAC

ADDRESS (number and street) **915 WILSHIRE BLVD SUITE 1620**
Check if different than previously reported. (ACC) **LOS ANGELES CA 90017**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00461756 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2017 through / / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Crane, Donald, H., , JD
Type or Print Name of Treasurer

Signature of Treasurer Crane, Donald, H., , JD [Electronically Filed] Date / / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

CAPG FEDERAL PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		<input type="text" value="122122.17"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="122122.17"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="55072.20"/>	<input type="text" value="55072.20"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="177194.37"/>	<input type="text" value="177194.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="38082.28"/>	<input type="text" value="38082.28"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="139112.09"/>	<input type="text" value="139112.09"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
CAPG FEDERAL PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	54300.00	54300.00
(ii) Unitemized	761.00	761.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	55061.00	55061.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	55061.00	55061.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	11.20	11.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	55072.20	55072.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	55072.20	55072.20

DETAILED SUMMARY PAGE

of Disbursements

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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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2582.28	2582.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2582.28	2582.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35500.00	35500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	38082.28	38082.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38082.28	38082.28

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)	55061.00	55061.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	55061.00	55061.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2582.28	2582.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2582.28	2582.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 27
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
CAPG FEDERAL PAC

A. Ransohoff, Kurt, , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 South Patterson Avenue
 City Santa Barbara State CA Zip Code 93111-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sansum Clinic Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 29 / 2017
Transaction ID : ABDB1B2A985434D0192D
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. McDermott, Mara, , Miss,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1501 M St NW Ste 640
 City Washington State DC Zip Code 20005-1783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPG Occupation (for Individual) VP of Federal Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 12 / 2017
Transaction ID : A5CD5FD13916548DCA4E
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Serota, Martin, , Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 76059 Via Montelena
 City Indian Wells State CA Zip Code 92210-8692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AltaMed Health Services Occupation (for Individual) Senior Vice President, CMO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : AA304C15266E644E5AF4
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. Crane, Donald, H., , JD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 Wilshire Blvd
 Ste 1620
 City Los Angeles State CA Zip Code 90017-2658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPG Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : A9E02EF3D7EDD426D941
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Schafer, Mark, , Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2742 Dow Ave.
 City Tustin State CA Zip Code 92780-7242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MemorialCare Medical Group Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : A26ADA803C44D441C975
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Deutsch, Stephen, , , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 North Robertson, #101
 City Beverly Hills State CA Zip Code 90211-6002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cedars-Sinai Medical Group Occupation (for Individual) Medical Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : A89633433C9584207B4E
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. Mahowald, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17777 Center Court Drive
 suite 400
 City Cerritos State CA Zip Code 90703-9346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DaVita Health Care Partners Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : AC867A1ABB0D64B90A69
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. Hutchins, Leigh, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3990 Concors, Suite 500
 Suite 500
 City Ontario State CA Zip Code 91764-7983
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAMM California Occupation (for Individual) President and Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : AAEF45FD6E9614AF7ABA
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Chicoine, Ray, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Technology Drive
 City Irvine State CA Zip Code 92618-2302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Monarch Healthcare Occupation (for Individual) President, Monarch HealthCare
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : A1B0C6E6FC47B4B768C9
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. Chan, Raymondj, , , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 Orange Tree Lane, Suite 103
 City Redlands State CA Zip Code 92374-2823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Epic Management, LP Chief Medical Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2510.00

Date of Receipt
 06 / 22 / 2017
Transaction ID : AA7DF4B89B7B141D5B3B
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. Bloom, Frederick, , , Jr. MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One Guthrie Square
 City Sayre State PA Zip Code 18840-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Guthrie Medical Group Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1010.00

Date of Receipt
 06 / 22 / 2017
Transaction ID : A246DD64536AC411DAE1
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Mason, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 Corporate Center Drive
 City Monterey Park State CA Zip Code 91754-7626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SynerMed President & CEO
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 06 / 22 / 2017
Transaction ID : A9AC25E58049942E790A
 Amount of Each Receipt this Period
 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 18

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. Joyner, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2409 Camino Ramon
 City San Ramon State CA Zip Code 94583-4285
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hill Physicians Medical Group Occupation (for Individual) Chief Operating Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 22 / 2017
Transaction ID : A73B13B504EEF4077907
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Mast, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3654 Holboro Drive
 City Los Angeles State CA Zip Code 90027-1432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Facey Medical Foundation Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : AAD680E78EB3D4093A84
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Lipeles, Richard, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 City Pkwy W Ste 400
 City Orange State CA Zip Code 92868-2900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Heritage Provider Network Occupation (for Individual) COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : ABEDDC1C6A7234DC5B9C
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 27
<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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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. Fish, Richard, , MBA
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 640469 #700

City San Francisco	State CA	Zip Code 94164-0469
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Brown & Toland Physicians	Occupation (for Individual) Chief Executive Officer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2017

Transaction ID : A50F1C769A41047C5866

Amount of Each Receipt this Period
2500.00

Memo Item

B. Ransohoff, Kurt, , MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 470 South Patterson Avenue

City Santa Barbara	State CA	Zip Code 93111-2404
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Sansum Clinic	Occupation (for Individual) Physician
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2017

Transaction ID : A18AB78319DCB438F84D

Amount of Each Receipt this Period
1500.00

Memo Item

C. Shinto, Richard, , MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 Chardon Avenue Suite 500

City San Juan	State PR	Zip Code 00908
------------------	-------------	-------------------

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

Name of Employer (for Individual) MSO of Puerto Rico	Occupation (for Individual) Physician
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2017

Transaction ID : A2C0ECD057D9B491DBBB

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	6500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
	<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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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. Floro, Jerry, , Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17777 Center Court Drive, Suite 40
 City Cerritos State CA Zip Code 90703-9346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pioneer Medical Group Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : AB54199E64CED407BB38
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. Hundal, Ravi, , , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1601 Ygnacio Valley Road
 City Walnut Creek State CA Zip Code 94598-3122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) John Muir Medical Group Occupation (for Individual) SVP/CFO John Muir Medical Group
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : AA293E8C0355C4BB1A86
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Prasad, Jeereddi, , , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9302 Pittsburg Avenue, Suite 220
 City Rancho Cucamonga State CA Zip Code 91730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Prospect Medical Group Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2017
Transaction ID : AFE5DFCD63C4E49DDBB5
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. Manemann, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5247 Coleridge Ct
 City Carlsbad State CA Zip Code 92008-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) St. Joseph Heritage Healthcare Occupation (for Individual) President and CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2017
Transaction ID : A549C5B15ECF740B0976
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. Jenrette, John, E., Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 451 North Harper Ave.
 City Los Angeles State CA Zip Code 90048-2220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sharp Healthcare Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2017
Transaction ID : A41764AB041374027BB2
 Amount of Each Receipt this Period
 2500.00
 Memo Item

C. Tint, Daisy, , , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 E Yale Loop
 City Irvine State CA Zip Code 92604-4697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MemorialCare Medical Foundation Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2017
Transaction ID : ADF7EFBC8539442A7B1C
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. Hernandez, Carlos, , Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8637 Fredericksburg Road
Suite 360

City San Antonio State TX Zip Code 78240-1285

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

Name of Employer (for Individual) WellMed Medical Group, P.A. Occupation (for Individual) PRESIDENT, WELLMED MEDICAL GR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 29 / 2017
Transaction ID : A13A956333C5747D3B6B

Amount of Each Receipt this Period 2500.00

Memo Item

B. Bare, Ian, , Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26991 Crown Valley Pkwy

City Mission Viejo State CA Zip Code 92691-6528

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

Name of Employer (for Individual) MemorialCare Medical Group Occupation (for Individual) Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 29 / 2017
Transaction ID : AF3ACFAA59CE7473DB33

Amount of Each Receipt this Period 500.00

Memo Item

C. Kariya, Ena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 722 Baker Street

City Costa Mesa State CA Zip Code 92626-4320

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

Name of Employer (for Individual) MemorialCare Medical Group Occupation (for Individual) Internal Medicine

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 29 / 2017
Transaction ID : A777486F9CB9844D1999

Amount of Each Receipt this Period 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. Wong, Anthony, , Dr., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 514 Luminous

City Irvine	State CA	Zip Code 92603-4263
----------------	-------------	------------------------

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

Name of Employer (for Individual) MemorialCare Medical Group	Occupation (for Individual) Physician
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : A52C8B9A388F14526B7B

Amount of Each Receipt this Period
500.00

Memo Item

B. Israel, Alan, , Dr., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 E Yale Loop

City Irvine	State CA	Zip Code 92604-4697
----------------	-------------	------------------------

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

Name of Employer (for Individual) MemorialCare Medical Group	Occupation (for Individual) Physician
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

Transaction ID : A4378F74AF71C493EB29

Amount of Each Receipt this Period
300.00

Memo Item

C. Asner, Bart, S, Dr., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 Technology Drive

City Irvine	State CA	Zip Code 92618-2302
----------------	-------------	------------------------

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

Name of Employer (for Individual) Monarch Healthcare	Occupation (for Individual) President, OptumCare Southern Califorr
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : ABB58A13786F84F35A8C

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 16 OF 27
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Crane, Donald, H., , JD

Mailing Address 915 Wilshire Blvd
Ste 1620

City Los Angeles State CA Zip Code 90017-2658

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

Name of Employer (for Individual) CAPG Occupation (for Individual) President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2017

Transaction ID : A46560B6846C7479B9E3

Amount of Each Receipt this Period
2000.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	54300.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. PayPal USA

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2017

FEC Identification Number

C
Transaction ID : **BEAF3D44B4**
Amount of Each Disbursement this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.Net

Mailing Address PO Box 947

City American Fork State UT Zip Code 84003-0947

Purpose of Disbursement
Gateway Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2017

FEC Identification Number

C
Transaction ID : **B072600A639**
Amount of Each Disbursement this Period
25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Evo Payments International

Mailing Address 515 Broadhollow Rd

City Melville State NY Zip Code 11747-3705

Purpose of Disbursement
Bank Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2017

FEC Identification Number

C
Transaction ID : **B4044F7BAC**
Amount of Each Disbursement this Period
1.25

Memo Item

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

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

56.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. PayPal USA

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2017

FEC Identification Number

C
Transaction ID : B76F44354FE
Amount of Each Disbursement this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.Net

Mailing Address PO Box 947

City American Fork State UT Zip Code 84003-0947

Purpose of Disbursement
Gateway Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2017

FEC Identification Number

C
Transaction ID : B81AAA8A70
Amount of Each Disbursement this Period
25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Evo Payments International

Mailing Address 515 Broadhollow Rd

City Melville State NY Zip Code 11747-3705

Purpose of Disbursement
Bank Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2017

FEC Identification Number

C
Transaction ID : BFDBA7597E
Amount of Each Disbursement this Period
1.75

Memo Item

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

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

56.75

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Authorize.Net

Mailing Address PO Box 947

City American Fork State UT Zip Code 84003-0947

Purpose of Disbursement Gateway Fee

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2017

FEC Identification Number

C
Transaction ID : B90A2CCB3I
Amount of Each Disbursement this Period
25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PayPal USA

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2017

FEC Identification Number

C
Transaction ID : B7736E3DCC
Amount of Each Disbursement this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PayPal USA

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2017

FEC Identification Number

C
Transaction ID : B816D2C413
Amount of Each Disbursement this Period
30.00

Memo Item

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

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

85.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. Evo Payments International

Full Name (Last, First, Middle Initial)

Mailing Address 515 Broadhollow Rd

City Melville State NY Zip Code 11747-3705

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2017

FEC Identification Number: C

Transaction ID : **BF82B154B5**

Amount of Each Disbursement this Period: 37.05

Memo Item

B. Authorize.Net

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 947

City American Fork State UT Zip Code 84003-0947

Purpose of Disbursement Gateway Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 04 / 2017

FEC Identification Number: C

Transaction ID : **B1E56EA26B**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. Evo Payments International

Full Name (Last, First, Middle Initial)

Mailing Address 515 Broadhollow Rd

City Melville State NY Zip Code 11747-3705

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 01 / 2017

FEC Identification Number: C

Transaction ID : **B10F5F3303I**

Amount of Each Disbursement this Period: 1.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 63.80

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. PayPal USA

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 03 / 2017

FEC Identification Number
C [REDACTED]
Transaction ID : B697B49EE3.
Amount of Each Disbursement this Period
[REDACTED] 30.00

Memo Item

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

Mailing Address PO Box 947

City American Fork State UT Zip Code 84003-0947

Purpose of Disbursement
Gateway Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 04 / 2017

FEC Identification Number
C [REDACTED]
Transaction ID : BA98A9F07D.
Amount of Each Disbursement this Period
[REDACTED] 25.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Evo Payments International

Mailing Address 515 Broadhollow Rd

City Melville State NY Zip Code 11747-3705

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 01 / 2017

FEC Identification Number
C [REDACTED]
Transaction ID : BF985C87FF
Amount of Each Disbursement this Period
[REDACTED] 1.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ [REDACTED] 56.75

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. PayPal USA

Date of Disbursement
MM / DD / YYYY
06 / 03 / 2017

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

State: District:

FEC Identification Number
C

Transaction ID : BF983B5429

Amount of Each Disbursement this Period
30.00

Memo Item

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

Date of Disbursement
MM / DD / YYYY
06 / 04 / 2017

Mailing Address PO Box 947

City American Fork State UT Zip Code 84003-0947

Purpose of Disbursement
Gateway Fee

Candidate Name

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

State: District:

FEC Identification Number
C

Transaction ID : B75E203D20F

Amount of Each Disbursement this Period
25.00

Memo Item

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

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

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

State: District:

FEC Identification Number
C

Transaction ID : BF4AB24BDI

Amount of Each Disbursement this Period
1.18

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 56.18

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

Full Name (Last, First, Middle Initial) A. Aristotle		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 205 Pennsylvania Ave SE		FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1164	Transaction ID : BFB81DEA57 Amount of Each Disbursement this Period 2207.55
Purpose of Disbursement Credit Card Processing Fees		Category/Type	
Candidate Name		Memo Item <input type="checkbox"/>	
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) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/Type	
Candidate Name		Memo Item <input type="checkbox"/>	
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 MM / DD / YYYY	
Mailing Address		FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/Type	
Candidate Name		Memo Item <input type="checkbox"/>	
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).....▶	2207.55
TOTAL This Period (last page this line number only).....▶	2582.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. HATCH ELECTION COMMITTEE INC

Date of Disbursement: MM / DD / YYYY
01 / 23 / 2017

Mailing Address: PO BOX 3986

City: WASHINGTON State: DC Zip Code: 20027

Purpose of Disbursement: Contribution to Committee

Candidate Name: Hatch, Orrin, G., Sen.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: UT District:

FEC Identification Number: C00104752
Transaction ID: B8E4F6B1BE
Amount of Each Disbursement this Period: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. RICHARD E NEAL FOR CONGRESS COMMITTEE

Date of Disbursement: MM / DD / YYYY
06 / 12 / 2017

Mailing Address: 415 New Jersey Avenue SE, Unit 1
c/o Allison Griner

City: Washington State: DC Zip Code: 20003-4036

Purpose of Disbursement: Contribution to Committee

Candidate Name: Neal, Richard, E., Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MA District: 01

FEC Identification Number: C00226522
Transaction ID: BFEC71DE3C
Amount of Each Disbursement this Period: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. VOLUNTEERS FOR SHIMKUS

Date of Disbursement: MM / DD / YYYY
02 / 28 / 2017

Mailing Address: PO BOX 661

City: COLLINSVILLE State: IL Zip Code: 62234

Purpose of Disbursement: Contribution to Committee

Candidate Name: Shimkus, John, M., Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: IL District: 15

FEC Identification Number: C00258855
Transaction ID: B56B3E5534
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

A. MARCO RUBIO FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 661537

M M M	/	D D D	/	Y Y Y Y Y
05		15		2017

City MIAMI State FL Zip Code 33266

FEC Identification Number

Purpose of Disbursement Contribution to Committee

C	C00620518
---	-----------

Candidate Name

Rubio, Marco, , Sen.,

Category/Type

Transaction ID : B08D3D550B
Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) Debt Retirement

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WALDEN FOR CONGRESS

Date of Disbursement

Mailing Address PO BOX 1091

M M M	/	D D D	/	Y Y Y Y Y
04		21		2017

City HOOD RIVER State OR Zip Code 97031

FEC Identification Number

Purpose of Disbursement Contribution to Committee

C	C00333427
---	-----------

Candidate Name

Walden, Greg, P., Rep.,

Category/Type

Transaction ID : B1D88B9A10:
Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HOLDING ONTO OREGON'S PRIORITIES

Date of Disbursement

Mailing Address PO BOX 3314

M M M	/	D D D	/	Y Y Y Y Y
03		29		2017

City PORTLAND State OR Zip Code 97208

FEC Identification Number

Purpose of Disbursement Contribution to Committee

C	C00392738
---	-----------

Candidate Name

HOLDING ONTO OREGON'S PRIORITIES

Category/Type

Transaction ID : BFF350B558
Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) Other

5000.00

Memo Item

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

11500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

Full Name (Last, First, Middle Initial) A. LONE STAR LEADERSHIP PAC		Date of Disbursement MM / DD / YYYY 04 / 12 / 2017
Mailing Address PO BOX 30844		FEC Identification Number C 000415208 Transaction ID : BB97E30911 Amount of Each Disbursement this Period 2500.00
City Bethesda	State MD	Zip Code 20824-0844
Purpose of Disbursement Contribution to Committee		Category/ Type
Candidate Name LONE STAR LEADERSHIP PAC		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Other	

Full Name (Last, First, Middle Initial) B. MAJORITY COMMITTEE PAC--MC PAC		Date of Disbursement MM / DD / YYYY 01 / 05 / 2017
Mailing Address P.O. BOX 10134		FEC Identification Number C 000428052 Transaction ID : BB615C3E89I Amount of Each Disbursement this Period 5000.00
City Bakersfield	State CA	Zip Code 93389-0134
Purpose of Disbursement Contribution to Committee		Category/ Type
Candidate Name MAJORITY COMMITTEE PAC--MC PAC		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Other	

Full Name (Last, First, Middle Initial) C. TEAM RYAN		Date of Disbursement MM / DD / YYYY 06 / 12 / 2017
Mailing Address 320 1ST ST SE		FEC Identification Number C 000545947 Transaction ID : B1A0AEFD6I Amount of Each Disbursement this Period 5000.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Contribution to Committee		Category/ Type
Candidate Name TEAM RYAN		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Other	

SUBTOTAL of Disbursements This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CAPG FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. HEALTH FIRST COMMITTEE

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement
Contribution to Committee

Candidate Name
HEALTH FIRST COMMITTEE

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) Other

State: District:

Date of Disbursement
MM / DD / YYYY
05 / 05 / 2017

FEC Identification Number
C C00624841
Transaction ID : B39FF85E48
Amount of Each Disbursement this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. CITIZENS FOR PROSPERITY IN AMERICA TODAY PAC

Mailing Address 228 S WASHINGTON ST STE 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement
Contribution to Committee

Candidate Name
CITIZENS FOR PROSPERITY IN AMERICA TODAY PAC

Office Sought: House Senate President
Disbursement For: 2017 Primary General Other (specify) Other

State: District:

Date of Disbursement
MM / DD / YYYY
05 / 15 / 2017

FEC Identification Number
C C00491654
Transaction ID : B124D8EC41
Amount of Each Disbursement this Period
1500.00

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	35500.00