

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

California's New Frontier

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="2016"/>		20000.00
(b) Cash on Hand at Beginning of Reporting Period.....	43147.19	
(c) Total Receipts (from Line 19)	10000.00	79000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	53147.19	99000.00
7. Total Disbursements (from Line 31).....	41741.83	87594.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	11405.36	11405.36
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)	18094.99	

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

California's New Frontier

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

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).....	10000.00	79000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii).....▶	10000.00	79000.00
(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)	10000.00	79000.00
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.).....	0.00	0.00
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)).....▶	10000.00	79000.00
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19).....▶	10000.00	79000.00

DETAILED SUMMARY PAGE
of Disbursements

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	0.00	26744.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	26744.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	41741.83	60850.64
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)) ..	41741.83	87594.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41741.83	87594.64

DETAILED SUMMARY PAGE
of Disbursements

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)	10000.00	79000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	79000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	26744.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	26744.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

Amended to clarify sub vendor payments.

Form/Schedule:
Transaction ID:

**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 11
<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)
California's New Frontier

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bates, Gregory C., , ,		Date of Receipt MM / DD / YYYY 05 / 23 / 2016 Transaction ID : INCA36
Mailing Address 28100 Modjeska Canyon Rd		Amount of Each Receipt this Period 5000.00
City Silverado	State CA	Zip Code 92676
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Brower, Ronald, , ,		Date of Receipt MM / DD / YYYY 06 / 10 / 2016 Transaction ID : INCA41
Mailing Address 1043 Civic Center Drive, #200		Amount of Each Receipt this Period 2000.00
City Santa Ana	State CA	Zip Code 92703
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Lawyer	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Martin, Richard, , ,		Date of Receipt MM / DD / YYYY 06 / 10 / 2016 Transaction ID : INCA42
Mailing Address 13671 Jenet Circle		Amount of Each Receipt this Period 1000.00
City Santa Ana	State CA	Zip Code 92705
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Hoag Memorial Hospital	Occupation (for Individual) SVP & CNO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	8000.00
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 11
	<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)
California's New Frontier

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tarnutzer, Byron, , ,

Mailing Address PO Box 8226

City Newport Beach	State CA	Zip Code 92658
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Investments
---	--

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2016

Transaction ID : INCA43

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
 M M / D D / Y Y Y Y Y Y

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
 M M / D D / Y Y Y Y Y Y

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).....▶	10000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
California's New Frontier

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Probolsky Research			Nature of Debt (Purpose): Likely voter survey
Mailing Address 3990 Westerly Place, Suite 185			
City Newport Beach	State CA	Zip Code 92660	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD47	
Amount Incurred This Period 10000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strumwasser & Woocher LLP			Nature of Debt (Purpose): Legal fees
Mailing Address 10940 Wilshire Blvd, Suite 2000			
City Los Angeles	State CA	Zip Code 90024	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD50	
Amount Incurred This Period 8094.99	Payment This Period 0.00	Outstanding Balance at Close of This Period 8094.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	18094.99
2) TOTALS This Period (last page this line number only)..... ▶	18094.99
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	18094.99

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
California's New Frontier
FEC IDENTIFICATION NUMBER
C C00589317

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Forde & Mollrich
Mailing Address: 4041 MacArthur Blvd., 190
City: Newport Beach, State: CA, Zip Code: 92660
Purpose of Expenditure: Automated phone programs
Category/Type: 24E
Date of Public Distribution/Dissemination: 05/23/2016
Amount: 15379.59
Transaction ID: EDTEALC23
Date of Disbursement or Obligation: 05/20/2016
Name of Federal Candidate: Sanchez, Loretta, , ,
Support: [X] Oppose: []
Office Sought: [] House [X] Senate [] President []
State: CA
Calendar Year-To-Date Per Election for Office Sought: 60850.64
Disbursement For: [X] Primary [] General [] Other (specify)

Full Name of Payee: Forde & Mollrich
Mailing Address: 4041 MacArthur Blvd., 190
City: Newport Beach, State: CA, Zip Code: 92660
Purpose of Expenditure: Automated phone programs
Category/Type: 24E
Date of Public Distribution/Dissemination: 05/23/2016
Amount: 14986.84
Transaction ID: EDTEALC48
Date of Disbursement or Obligation: 06/02/2016
Name of Federal Candidate: Sanchez, Loretta, , ,
Support: [X] Oppose: []
Office Sought: [] House [X] Senate [] President []
State: CA
Calendar Year-To-Date Per Election for Office Sought: 60850.64
Disbursement For: [X] Primary [] General [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 30366.43
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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.

Palmer, Beverly Grossman, , ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

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

NAME OF COMMITTEE (In Full) California's New Frontier	FEC IDENTIFICATION NUMBER ▼ C C00589317
---	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Forde & Mollrich <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4041 MacArthur Blvd., 190	Amount <input type="text"/> 11375.40 Transaction ID : EDTEALC49 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Newport Beach State CA Zip Code 92660	
Purpose of Expenditure Automated phone programs Category/Type <input type="text"/> 24E	
Name of Federal Candidate: Sanchez, Loretta, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 60850.64	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address	Amount <input type="text"/>
City State Zip Code	
Purpose of Expenditure Category/Type <input type="text"/>	
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 11375.40
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/> 41741.83

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.

Palmer, Beverly Grossman, , , **[Electronically Filed]** Date / /

Signature