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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

PONIVI 3	For An Auth	orized Com	mittee	0	ffice Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typing, type er the lines.	12FE4M5	
Paul Chabot Congress					1
ADDRESS (number and street)	12223 Highland Av	enue 			
▼ Check if different	# 106-228				
than previously reported. (ACC)	Rancho Cucamonga	a 	<u> </u>	CA 91	1739-2574
	4050 W	CITY ▲		STATE ▲	ZIP CODE ▲
2. FEC IDENTIFICATION NUI	MBEK ▼ _				STATE ▼ DISTRICT
C C00557884	3	. IS THIS REPORT	NEW (N) OR	AMENDEI (A)	
4. TYPE OF REPORT (Choo	ose One) (b)	12-Day PRE	-Election Report for t	he:	
(a) Quarterly Reports:		П	Primary (12P)	General (120	G) Runoff (12R)
April 15 Quarterly Re	eport (Q1)	H			
July 15 Quarterly Re	port (Q2)	Ш	Convention (12C)	Special (12S	(3)
October 15 Quarterly		Election on	M M / D D	/ Y Y Y Y	in the State of
January 31 Year-End	Report (YE) (c)	30-Day POS	T-Election Report for	the:	
			General (30G)	Runoff (30R)	Special (30S)
Termination Report (ΓER)	Election on	M M / D D	/	in the State of
5. Covering Period 07	/ 01 / Y	^Y 2020	through	1 M / D D / 30	2020
I certify that I have examined this Type or Print Name of Treasurer	Report and to the Lawler, Kelly, , ,	best of my kr	nowledge and belief it	is true, correct and c	complete.
	r, Kelly, , ,		[Electronically Filed]	Date 10	14 / 2020
NOTE: Submission of false, erroneo	us, or incomplete inf	formation may	subject the person sigr	ning this Report to the	penalties of 52 U.S.C. §30109
Office				· I	
Use Only					FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Paul Chabot Congress

2020 2020 09 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 2266.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 2266.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 150.00 23561.75 (from Line 17) (b) Total Offsets to Operating 4852.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 18709.75 150.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 610.44 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 72507.88 Schedule C and/or Schedule D).....

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

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Paul Chabot Congress

07 2020 09 30 2020 Report Covering the Period: From: To:

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11.	CONTRIBUTIONS (other than loans) FROM:				
	(a) Individuals/Persons Other Than Political Committees				
	(i) Itemized (use Schedule A)	0.00	1000.00		
	(ii) Unitemized	0.00	266.00		
	(iii) TOTAL of contributions from individuals	0.00	1266.00		
	(b) Political Party Committees	0.00	0.00		
	(such as PACs)	0.00	1000.00		
	(d) The Candidate	0.00	0.00		
	(add Lines 11(a)(iii), (b), (c), and (d))	0.00	2266.00		
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3.	LOANS:				
	(a) Made or Guaranteed by the Candidate	0.00	0.00		
	(b) All Other Loans(c) TOTAL LOANS	0.00	0.00		
	(add Lines 13(a) and (b))	0.00	0.00		
	OFFSETS TO OPERATING EXPENDITURES				
	(Refunds, Rebates, etc.)	0.00	4852.00		
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	650.87		
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	7768.87		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 10

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	150.00	23561.75
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	5352.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	5352.00
20.	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 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	150.00	28913.75
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	rting period	760.44
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		760.44
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	150.00
17	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	610.44

SCHEDULE B (FEC Form 3)

PAGE 5 10 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Paul Chabot Congress Full Name (Last, First, Middle Initial) Date of Disbursement Integrated Solution Political 2020 16 Mailing Address 4142 Adams Avenue Suite 103-550 State City Zip Code **FEC Identification Number** CA San Diego 92116 Purpose of Disbursement Software 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2016 150.00 Office Sought: House Senate Primary ✗ General Transaction ID: B-8729 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 150.00 TOTAL This Period (last page this line number only)..... 150.00

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 6 OF
FOR LINE NUMBER:
(check only one)

13a 13b

						130			
	ME OF COMMITTEE (In Full) aul Chabot Congress				Trans	action ID : C-4784			
		F:				T=:			
LOAN SOURCE Full Name (Last, First, Middle Initial) Chabot, Paul, R, Dr.,					☐ Memo Ite	x Primary			
Mailing Address PO Box 6656						General Other (specify) ▼			
	City State ZIP Cod			de	✗ Personal Funds of the Candidate				
	McKinney TX 75071				To see that I alway of the Gallatate				
	Original Amount of Loan		Cumulative Pay	yment To		alance Outstanding at Close of This Period			
	4500	0.00			0.00	4500.00			
	TERMS Date Incurred		D	ate Due	Interest R (If none, en				
	M05 ^M / D29 ^D / Y Ž014	Υ	M12 M / D31 D	/ Y	Ž016 ^Y	0.00 % (apr) Yes No			
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City State ZIP Code		Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·					
	Full Name (Last, First, Middle Initial) Mailing Address				Name of Employer				
					Occupation				
					Amount Guaranteed Outstanding:				
	City	State	ZIP Code						
	3. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
		_			Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7 7 7			
	4. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address			Occupation					
				Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	7 7			
S	UBTOTALS This Period This Page (optional)			······	4500.00			
T	OTALS This Period (last page in this	line only	y)		······	7			
_ c	Carry outstanding balance only to LII	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry fo	orward to appropriate line of Summary.			
	<u> </u>								

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 7
FOR LINE NUMBER: (check only one)

13a

OF

		100			
NAME OF COMMITTEE (In Full) Paul Chabot Congress		Transaction ID: C-4783			
LOAN SOURCE Full Name (Last, First, M Chabot, Paul, R, Dr.,	☐ Memo Item				
Mailing Address PO Box 6656	Mailing Address PO Box 6656				
City McKinney	State	ZIP Code 75071 Personal Funds of the Candidate			
Original Amount of Loan	Cumulative Pa	/ment To Date Balance Outstanding at Close of This Period			
62000.00	7	45252.00 16748.00			
TERMS Date Incurred	Γ	ate Due Interest Rate Secured: (If none, enter 0)			
M03M / D06D / Y Z014 Y	M ₁₂ M / D ₃₁ D	/ Y Ž016 Y 0.00			
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City	ZIP Code	Amount Guaranteed Outstanding:			
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line on		16748.00			
Carry outstanding balance only to LINE 3, So	chedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.			

SCHEDULE C (FEC Form 3) **LOANS**

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

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

13a

						130			
	ME OF COMMITTEE (In Full) aul Chabot Congress		Trans	saction ID : C-4785					
	LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2014								
	Chabot, Paul, R, Dr.,	, 14110	.2.0		∐ Memo Ite	Primary			
L						✗ General			
	Mailing Address PO Box 6656					Other (specify) ▼			
	City State ZIP Coc McKinney TX 75071			de	✗ Personal Funds of the Candidate				
	McKinney TX 75071 Original Amount of Loan Cumulative Payment To I			Date B	ialance Outstanding at Close of This Peric				
	75000	00		,					
	7 3000	.00			33900.00	41100.00			
	TERMS Date Incurred		D	ate Due	Interest R (If none, er				
	M09 ^M / D23 ^D / Y 2014	Y	M12 M / D31 D	/ Y	ž016 ^Y	0.00 % (apr) Yes X No			
	List All Endorsers or Guarantors	(if any) t	o Loan Source						
	1. Full Name (Last, First, Middle Ir	nitial)			Name of Employer				
	Mailing Address				Occupation				
		ı			Amount				
	City State ZIP Code			Guaranteed Outstanding:	9				
	2. Full Name (Last, First, Middle Initial)			Name of Employer					
	Mailing Address				Occupation				
		Г			Amount Guaranteed				
	City	State	ZIP Code		Outstanding:				
	3. Full Name (Last, First, Middle Ini	tial)			Name of Employer Occupation				
	Mailing Address								
-	2''	a	710.6		Amount Guaranteed				
	City	State	ZIP Code		Outstanding:	9			
	4. Full Name (Last, First, Middle Ini	tial)	•		Name of Employer				
	Mailing Address			Occupation					
				Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	7			
SU	BTOTALS This Period This Page (c	ptional)			······	41100.00			
то	TALS This Period (last page in this	line only	y)		······•	62348.00			
Ca	Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.								

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Excluding Loans

1)

2)

3)

NAI

Paul	Chabot	Congress
	O	

luding Loans			numl	pered line)	,	x 10
ME OF COMMITTEE (In Full)						
Paul Chabot Congres	S					
A. Full Name (Last, First, Middle Initial) of De	Nature of Debt (Purpose):					
Political Media Inc.	Email Marl	keting				
Mailing Address 1800 Diagonal Road Suite 600						
City	State	Zip Code				
Alexandria	VA	22314				
Outstanding Balance Beginning This Period				Transacti	on ID : D-8694	
1000.00						
Amount Incurred This Period	D	ayment This Period		Outstandi	ng Balance at C	lose of This Period
				Outstand	ng Balance at O	
0.00		0.0	00		7	1000.00
B. Full Name (Last, First, Middle Initial) of Deb	otor or Creditor			Nature of D	ebt (Purpose):	
Capital Campaigns Inc.				Fundraisin	g Consulting	
Mailing Address 38 Executive Park Suite 390						
City	State	Zip Code				
Irvine	CA	92614-4730				
Outstanding Balance Beginning This Period				Transacti	on ID : D-6669	
1250.00						
Amount Incurred This Period	P	ayment This Period		Outstandi	ng Balance at C	lose of This Period
0.00	,	0.0	00		, , ,	1250.00
C. Full Name (Last, First, Middle Initial) of De	ebtor or Creditor					
MGR Real Estate				Rent	ebt (Purpose):	
Mailing Address 1461 E Cooley Drive Suite 205						
City	State	Zip Code				
Colton	CA	92324-3983				
Outstanding Balance Beginning This Period				Transact	ion ID : D-1895	
485.00						
Amount Incurred This Period	Р	ayment This Period		Outstandi	ng Balance at C	lose of This Period
0.00	,	0.0	00		7 7	485.00
SUBTOTALS This Period This Page (optional)		▶			2735.00
TOTALS This Period (last page this line num	ber only) ······		···· •		7	
TOTAL OUTSTANDING LOANS from Schedu	ule C (last page	only)·····	▶		7	
ADD 2) and 3) and carry forward to appropri	ate line of Sum	mary Page (last page or	nly) ►		7	

PAGE

FOR LINE NUMBER:

(check only one)

(Use separate schedule(s)

for each

9 OF

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 10 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

NAME OF COMMITTEE (In Full)	
Paul Chahot Congress	

F	aul Chabot Congres	S				
	A. Full Name (Last, First, Middle Initial) of De Capital Campaigns Inc.	Nature of Debt (Purpose): Fundraising Consulting and Expenses				
	Mailing Address 38 Executive Park Suite 390	_				
	City Irvine	State CA	Zip Code 92614-4730			
	Outstanding Balance Beginning This Period	Transaction ID : D-6666				
	5062.44					
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
	0.00		0.00	5062.44		
	B. Full Name (Last, First, Middle Initial) of Del Capital Campaigns Inc.	otor or Cred	ditor	Nature of Debt (Purpose): Fundraising Consulting and Expenses		
	Mailing Address 38 Executive Park Suite 390					
	City Irvine	State CA	Zip Code 92614-4730			
•	Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of De	ebtor or Cre	Payment This Period 0.00 2	Outstanding Balance at Close of This Period 2362.44 Nature of Debt (Purpose):		
-	Mailing Address			- Hataio of Bost (Faiposo).		
-	City	State	Zip Code			
-	Outstanding Balance Beginning This Period Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
	7 7 7		7 7 7	7		
1)	SUBTOTALS This Period This Page (optional)		7424.88		
2)	TOTALS This Period (last page this line num	10159.88				
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	page only)	62348.00		
4)	ADD 2) and 3) and carry forward to appropr	72507.88				