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Image# 201607279021939490

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X F	or Other Than An Auth	orized Committee	Office U	Jse Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
AMERICANS FOR AC	COUNTABILITY IN L	EADERSHIP		
	1 1 1 1 1 1 1 1 1			
ADDRESS (number and street)	2150 RIVER PLAZA DR. #15	50		
Check if different than previously reported. (ACC)	SACRAMENTO		CA 9583	33
2. FEC IDENTIFICATION NU	IMBER ▼ CITY	Y A	STATE ▲	ZIP CODE ▲
C C00514224	3. IS	THIS NEW (N) OR	X AMENDED (A)	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q July 15 Quarterly Report (Q October 15 Quarterly Report (Q January 31 Year-End Report (Y) July 31 Mid-Year Report (Non-electior Year Only) (MY) Termination Report (TER)	Report Due On: Mar 2 Apr 2 (c) 12-Day PRE-Election Report for the: 3) Election (d) 30-Day	General (30G)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R) in the State of Special (30S) in the State of
5. Covering Period 06	01 2016	through 06	30 20	016
I certify that I have examined thi Type or Print Name of Treasurer		my knowledge and belief it is tr	rue, correct and comple	ete.
	Bauer	[Electronically Filed]	Date 07 / 22	7 2016
NOTE: Submission of false, errone	eous, or incomplete information	may subject the person signing	this Report to the penals	ties of 2 U.S.C. §437g.
Office Use				C FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)
Page 2

Write or Type Committee Name

AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP

06 01 2016 06 30 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 14486.55 January 1, 2016 (b) Cash on Hand at 30040.78 Beginning of Reporting Period..... 21299.08 116499.08 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 130985.63 51339.86 6(a) and 6(c) for Column B)..... 23979.93 103625.70 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 27359.93 27359.93 (subtract Line 7 from Line 6(d))..... 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 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Co	entributions (other than loans) From:	10001 1110 1 01100	
(a)	Individuals/Persons Other		
	Than Political Committees		
	(i) Itemized (use Schedule A)	20000.00	115000.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	20000.00	115000.00
(b)	Political Party Committees	0.00	0.00
(c)		0.00	0.00
(حا)	(such as PACs)	7	0.00
(d)	Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)	20000.00	115000.00
) Tr	ansfers From Affiliated/Other	7	7
	rty Committees	0.00	0.00
B. All	Loans Received	0.00	0.00
	an Repayments Received	0.00	0.00
	fsets To Operating Expenditures		
	efunds, Rebates, etc.)		
	arry Totals to Line 37, page 5)	0.00	200.00
	funds of Contributions Made		
	Federal Candidates and Other	0.00	
	litical Committees	0.00	0.00
	her Federal Receipts		4000.00
	ividends, Interest, etc.)	1299.08	1299.08
	ansfers from Non-Federal and Levin Funds		
(a)	Non-Federal Account	0.00	0.00
	(ITOTTI Scriedule H3)	0.00	0.00
41.		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
(b) (c) 19. To	(from Schedule H3) Levin Funds (from Schedule H5) Total Transfers (add 18(a) and 18(b)) tal Receipts (add Lines 11(d), , 13, 14, 15, 16, 17, and 18(c))	0.00	
To	tal Federal Receipts		

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	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	0.00	5042.45
Expenditures(c) Total Operating Expenditures	0.00	5943.45
(add 21(a)(i), (a)(ii), and (b))▶	0.00	5943.45
Transfers to Affiliated/Other Party		
CommitteesContributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures		
(use Schedule E)	23979.93	97682.25
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
	4 1 4 1 4 1	
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other	0.00	0.00
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
F		
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	
(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))	23979.93	103625.70
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	23979.93	103625.70

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)	20000.00	115000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20000.00	115000.00
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	5943.45
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	200.00
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	5743.45

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F3XA Transaction ID :

Summary page lines 7, 8, 24. Sch. B line 24

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF 12 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c **Detailed Summary Page**

13 14 15 16 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) AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP Full Name (Last, First, Middle Initial) . PALA BAND OF MISSION INDIANS Date of Receipt Mailing Address 35008 PALA TEMECULA RD. PMB 50 2016 06 10 City Zip Code State Transaction ID: INCA171 PALA CA 92059 Amount of Each Receipt this Period FEC ID number of contributing C 10000.00 federal political committee. Memo Item Name of Employer Occupation SOVEREIGN NATION **INDIAN TRIBE** Receipt For: Aggregate Year-to-Date ▼ Primary General 10000.00 Other (specify) Full Name (Last, First, Middle Initial) B. . YOCHA DEHE WINTUN NATION Date of Receipt Mailing Address P.O. BOX 18 06 20 2016 City State Zip Code Transaction ID: INCA173 **BROOKS** CA 95606 Amount of Each Receipt this Period FEC ID number of contributing 10000.00 federal political committee. Memo Item Name of Employer Occupation **SOVEREIGN NATION** INDIAN TRIBE Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 10000.00 Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 20000.00 SUBTOTAL of Receipts This Page (optional)..... 20000.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form ITEMIZED RECEIPTS

Image# 201607279021939497 SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 12 (check only one) 11a 11b 11c 12 13 14 15 16 X 17
	he name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) GATEWAY MEDIA Mailing Address 2150 RIVER PLAZA DR. #150 City State Zip Code		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SACRAMENTO FEC ID number of contributing federal political committee. Name of Employer	CA 95833 C Occupation	Amount of Each Receipt this Period 1299.08 Memo Item REFUND
Receipt For: 2016 ✓ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 1499.08	

B.		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. Name of Employer	Occupation	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) C. Mailing Address		Date of Receipt
City	State Zip Code	
FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General	Occupation Aggregate Year-to-Date ▼	Amount of Each Receipt this Period Memo Item
Other (specify) ▼	al)	1299.08

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

1299.08

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SA17 Transaction ID: INCA174

Refund for media not aired - LaMalfa IE

Form/Schedule: Transaction ID:

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

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

10 OF

	9
X	10

12

NAME OF COMMITTEE (In Full) AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MASS MAIL **GATEWAY MEDIA** Mailing Address 2150 RIVER PLAZA DR. #150 State Zip Code **SACRAMENTO** 95833 Transaction ID: PAYD164 Outstanding Balance Beginning This Period 95.11 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 95.11 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MASS MAIL FOR LAMALFA **GATEWAY MEDIA** Mailing Address 2150 RIVER PLAZA DR. #150 City State Zip Code **SACRAMENTO** 95833 CA Outstanding Balance Beginning This Period Transaction ID: PAYD165 22860.10 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 22860.10 0.00 0.00 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 Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 0.00 1) SUBTOTALS This Period This Page (optional)..... 0.00 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	11	OF	12
FOR L	INE 24	OF FO	DRM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP	FEC IDENTIFICATION NUMBER ▼
	C C00514224
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
	ate of Public Distribution/Dissemination
GATEWAY MEDIA	05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2150 RIVER PLAZA DR. #150 Ar	mount
City State Zip Code	95.11
SACRAMENTO CA 95833 Trai	nsaction ID : PDTE12 ate of Disbursement or Obligation
Purpose of Expenditure ONLINE ADVERTISING Category/ Type 24E	06 01 2016
Name of Federal Candidate Support Office So	ought: X House District: 01
DOLIG LAMALEA	esident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought Disburser 2016	ment For: X Primary General
Tot Election for Childe Cought	Other (specify) ►
Full Name of Payee	ate of Public Distribution/Dissemination
Mailing Address	05 31 2016
Mailing Address 2150 RIVER PLAZA DR. #150	mount
City State Zip Code	22860.10
O/ IO/ III/E/II/O	insaction ID : PDTE13 ate of Disbursement or Obligation
Purpose of Expenditure MASS MAIL Category/ Type 24E	06 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office Sc	ought: X House District:01
DOLIG LAMALEA	esident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought Disburser 2016	ment For:
	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	22955.21
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
David Bauer [Electronically Filed] Date 07	27 2016
Signature	التنتا التنا

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	12	OF	12
FOR	LINE 24	OF F	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (IN FUII) AMERICANS FOR ACCOUNTABILITY IN LEA	DERSHIP	FEC IDENTIFICATION NUMBER ▼
		C C00514224
Check if 24-hour report 48-hour report New r	eport Amends report fi	lled on Man / Dad / Yayayay
Full Name of Payee GATEWAY MEDIA	Memo Item	Date of Public Distribution/Dissemination
		06 01 2016
Mailing Address 2150 RIVER PLAZA DR. #150		Amount
City State	Zip Code	1024.72
SACRAMENTO CA	95833	Transaction ID : EDTEALC17 Date of Disbursement or Obligation
Purpose of Expenditure MASS MAIL	Category/ Type 24E	06
Name of Federal Candidate	V 0	ffice Sought: X House District: 01
DOUG LAMALFA	Support Of Oppose	Trouse Blothot.
		Fresident Senate State.
Calendar Year-To-Date Per Election for Office Sought		isbursement For: X Primary General Other (specify) ▶
Full Name of Payee	Memo Item	Date of Public Distribution/Dissemination
Tail Name of Fayor		M M / D D / Y Y Y Y Y
Mailing Address		Amount
City State	Zip Code	
		Date of Disbursement or Obligation
Purpose of Expenditure	Category/ Type	Mam / Dab / Yayayay
Name of Federal Candidate	Support Of	ffice Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date	Di	isbursement For: Primary General
Per Election for Office Sought	,	Other (specify)
(a) SUPTOTAL of Itamized Independent Expanditures		4024.72
(a) SUBTOTAL of Itemized Independent Expenditures	•••••	1024.72
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures		23979.93
		7 7 7
Under penalty of perjury I certify that the independent expenditur with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		
David Bauer [Electr	onically Filed]	07 27 2016
Signature	Date Date	