

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

David E. Hall Campaign Committee

Report Covering the Period:

From:

07/01/2016

To:

09/30/2016

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	10.00	100.00
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	10.00	100.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	0.59	5.03
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.59	5.03
8. Cash on Hand at Close of Reporting Period (from Line 27)	161.19	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on 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

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

DAVID E. HALL CAMPAIGN COMMITTEE

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 07 / 01 / 2016 To: ^{M M / D D / Y Y Y Y} 09 / 30 / 2016

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).....	10.00	100.00
(ii) Unitemized.....	.	.
(iii) TOTAL of contributions from individuals ▶	10.00	100.00
(b) Political Party Committees.....	.	.
(c) Other Political Committees (such as PACs).....	.	.
(d) The Candidate.....	.	.
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	10.00	100.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	.	.
(b) All Other Loans.....	.	.
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	.	.
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	10.00	100.00

CONFIDENTIAL INFORMATION

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	, , 0 59	, , 5 03
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	, , .	, , .
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	, , .	, , .
(b) Of All Other Loans	, , .	, , .
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	, , .	, , .
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	, , .	, , .
(b) Political Party Committees.....	, , .	, , .
(c) Other Political Committees (such as PACs)	, , .	, , .
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	, , .	, , .
21. OTHER DISBURSEMENTS	, , .	, , .
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	, , 0 59	, , 5 03

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	, , 159 78
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	, , 10 00
25. SUBTOTAL (add Line 23 and Line 24).....	, , 169 78
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	, , 0 59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	, , 169 19

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

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

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) David E. Hall Campaign Committee		Full Name (Last, First, Middle Initial)	
A. Whip, Tracy Mailing Address 6 Howe Circle		Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2016	
City Randolph	State MA	Zip Code 02368	
FEC ID number of contributing federal political committee. C 00592352		Amount of Each Receipt this Period 10.00	
Name of Employer Liberty Hotel		Occupation waitress / hostess	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10.00	
B. Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		M M / D D / Y Y Y Y	
City State Zip Code		Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	
C. Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		M M / D D / Y Y Y Y	
City State Zip Code		Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional).....		10.00	
TOTAL This Period (last page this line number only).....		169.19	

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

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21
 PAGE / OF /

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NAME OF COMMITTEE (In Full)
David E. Hall Campaign Committee

A. Full Name (Last, First, Middle Initial) **Pay Pal**

Mailing Address **1840 Embarcadero Rd.**

City **Palo Alto** State **CA** Zip Code **94303**

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement **08/24/2016**

Amount of Each Disbursement this Period **.59**

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) **.59**

TOTAL This Period (last page this line number only) **5.03**

NON-PROFIT ORGANIZATION

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE / OF /

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

David E. Hall Campaign Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address

NONE

City

State

ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

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

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

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

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only)..... ▶

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

NAME OF COMMITTEE (In Full)
David E. Hall Campaign Committee

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

NONE

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

B. 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

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)	▶			
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)	▶			

