

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.
CE Action Committee

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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 / / through / /

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

Signature of Treasurer Rita Copeland [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CE Action Committee

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="2015"/>		<input type="text" value="2853.64"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2853.64"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="42626.44"/>	<input type="text" value="42626.44"/>
(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="45480.08"/>	<input type="text" value="45480.08"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="45480.08"/>	<input type="text" value="45480.08"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
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

CE Action Committee

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

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).....	41744.68	41744.68
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	41744.68	41744.68
(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)	41744.68	41744.68
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).....	881.76	881.76
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))..... ▶	42626.44	42626.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	42626.44	42626.44

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
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	45480.08	45480.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	45480.08	45480.08
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)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	45480.08	45480.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45480.08	45480.08

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
33. Total Contributions (other than loans) (from Line 11(d), page 3)	41744.68	41744.68
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	41744.68	41744.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	45480.08	45480.08
37. Offsets to Operating Expenditures (from Line 15, page 3).....	881.76	881.76
38. Net Operating Expenditures (subtract Line 37 from Line 36)	44598.32	44598.32

**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 14
(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"/> 17
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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)
CE Action Committee

A. Full Name (Last, First, Middle Initial)
Thomas F. Steyer

Mailing Address 150 Sutter Street, Unit 538

City San Francisco State CA Zip Code 94104

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

Name of Employer Fahr, LLC Occupation Founder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
41744.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2015

Transaction ID : INCA286

Amount of Each Receipt this Period
 41744.68

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

SUBTOTAL of Receipts This Page (optional).....▶	41744.68
TOTAL This Period (last page this line number only).....▶	41744.68

**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 14
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
CE Action Committee

A. Olson Hagel & Fishburn, LLP
 Full Name (Last, First, Middle Initial)
 Mailing Address 555 Capitol Mall, Suite 1425
 City Sacramento State CA Zip Code 95814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 881.76

Date of Receipt 03 / 17 / 2015
Transaction ID : INCA277
 Amount of Each Receipt this Period 292.40
 Refund of Legal & Reporting Services overpayment

B. Olson Hagel & Fishburn, LLP
 Full Name (Last, First, Middle Initial)
 Mailing Address 555 Capitol Mall, Suite 1425
 City Sacramento State CA Zip Code 95814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 881.76

Date of Receipt 04 / 15 / 2015
Transaction ID : INCA279
 Amount of Each Receipt this Period 589.36
 Refund of Legal & Reporting Services overpayment

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

Date of Receipt
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	881.76
TOTAL This Period (last page this line number only).....▶	881.76

**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"/> 24	<input type="checkbox"/> 25	<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)
CE Action Committee

Full Name (Last, First, Middle Initial)

A. Covington & Burling, LLP

Mailing Address 850 Tenth Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal & Reporting Services; See Form 99

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB289

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Covington & Burling, LLP

Mailing Address 850 Tenth Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal & Reporting Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB291

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Covington & Burling, LLP

Mailing Address 850 Tenth Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal & Reporting Services; See Form 99

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB293

Amount of Each Disbursement this Period

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

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"/> 24	<input type="checkbox"/> 25	<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)
CE Action Committee

Full Name (Last, First, Middle Initial)

A. Covington & Burling, LLP

Mailing Address 850 Tenth Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : EXPB303

Amount of Each Disbursement this Period

9396.00

Full Name (Last, First, Middle Initial)

B. Covington & Burling, LLP

Mailing Address 850 Tenth Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : EXPB295

Amount of Each Disbursement this Period

6168.00

Full Name (Last, First, Middle Initial)

C. Covington & Burling, LLP

Mailing Address 850 Tenth Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : EXPB299

Amount of Each Disbursement this Period

1899.05

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

17463.05

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"/> 24	<input type="checkbox"/> 25	<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)
CE Action Committee

Full Name (Last, First, Middle Initial)

A. Covington & Burling, LLP

Mailing Address 850 Tenth Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2015

Transaction ID : EXPB297

Amount of Each Disbursement this Period

8148.00

Full Name (Last, First, Middle Initial)

B. Covington & Burling, LLP

Mailing Address 850 Tenth Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2015

Transaction ID : EXPB301

Amount of Each Disbursement this Period

1368.00

Full Name (Last, First, Middle Initial)

C. Covington & Burling, LLP

Mailing Address 850 Tenth Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2015

Transaction ID : EXPB287

Amount of Each Disbursement this Period

1205.90

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

10721.90

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"/> 24	<input type="checkbox"/> 25	<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)
CE Action Committee

Full Name (Last, First, Middle Initial)

A. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2015

Transaction ID : EXPB272

Amount of Each Disbursement this Period

307.90

Full Name (Last, First, Middle Initial)

B. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2015

Transaction ID : EXPB274

Amount of Each Disbursement this Period

281.46

Full Name (Last, First, Middle Initial)

C. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2015

Transaction ID : EXPB276

Amount of Each Disbursement this Period

292.40

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

881.76

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"/> 24	<input type="checkbox"/> 25	<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)
CE Action Committee

Full Name (Last, First, Middle Initial)

A. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : EXPB305

Amount of Each Disbursement this Period

1209.48

Full Name (Last, First, Middle Initial)

B. United States Treasury

Mailing Address 1500 Pennsylvania Avenue, NW

City Washington State DC Zip Code 20220

Purpose of Disbursement
Payment for FEC Penalty

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 15 / 2015

Transaction ID : EXPB280

Amount of Each Disbursement this Period

2853.64

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

4063.12

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

45480.08

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 14
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CE Action Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Covington & Burling, LLP	Nature of Debt (Purpose): Legal & Reporting Services
Mailing Address 850 Tenth Street, NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period 1205.90	Transaction ID : PAYD258	
Amount Incurred This Period 0.00	Payment This Period 1205.90	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Covington & Burling, LLP	Nature of Debt (Purpose): Legal & Reporting Services; See Form 99
Mailing Address 850 Tenth Street, NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period 15315.50	Transaction ID : PAYD265	
Amount Incurred This Period -5250.25	Payment This Period 10065.25	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Covington & Burling, LLP	Nature of Debt (Purpose): Legal & Reporting Services
Mailing Address 850 Tenth Street, NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period 1899.05	Transaction ID : PAYD266	
Amount Incurred This Period 0.00	Payment This Period 1899.05	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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 14
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CE Action Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Covington & Burling, LLP	Nature of Debt (Purpose): Legal & Reporting Services; See Form 99
Mailing Address 850 Tenth Street, NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period 5002.00	Transaction ID : PAYD271	
Amount Incurred This Period -3031.50	Payment This Period 1970.50	Outstanding Balance at Close of This Period 0.00

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)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	0.00
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) ▶	