PAGE 1 / 10

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3	For An Authorized Committee					
NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	cample: If typing, type ver the lines.	12FE4M5		
Paul Chabot Congr	ress					
ADDRESS (number and stree	12223 Highlan	d Avenue				
▼	# 106-228	1 1 1 1 1 1				
Check if different than previously reported. (ACC)	Rancho Cucan	nonga		CA 917	39-2574	
2. FEC IDENTIFICATIO	N NUMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲	
C C00557884		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT CA 31	
July 15 Quart October 15 Q	terly Report (Q1) erly Report (Q2) tuarterly Report (Q3)	(b) 12-Day PRE	E-Election Report for th Primary (12P) Convention (12C)	e: General (12G) Special (12S)	Runoff (12R) in the State of	
January 31 Ye	ear-End Report (YE)	(c) 30-Day POS	ST-Election Report for t	he:		
Termination R	eport (TER)	Election on	General (30G)	Runoff (30R)	Special (30S) in the State of	
5. Covering Period	M M / D D /	Y Y Y Y Y 2017	through	06 / 0 / Y	y y y 2017	
I certify that I have examin	Lawler, Kelly,		nowledge and belief it i	is true, correct and co	mplete.	
Signature of Treasurer	Lawler, Kelly, , ,		[Electronically Filed]	Date 07	13 / Y Y Y Y Y Y 2017	
	erroneous, or incomple	te information may	subject the person signi	ng this Report to the pe	enalties of 52 U.S.C. §30109	
Office 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

2017 2017 06 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 1766.00 (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 1766.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 450.00 21173.11 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 450.00 21173.11 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 999.08 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 75859.88 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

FEC Form 3 (Revised 05/2016)

of Receipts

PAGE 3 / 10

I RECEIPTS	COLUMN A	COLUMN B							
Report Covering the Period: From:	M M M / D D / Y Y Y Y Y TO TO	: 06 / 06 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
Paul Chabot Congress									
Write or Type Committee Name									
rec Form 3 (nevised 05/2016)	<u>'</u>								

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. C	CONTRIBUTIONS (other than loans) FROM:		
(8	a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	500.00
	(ii) Unitemized	0.00	266.00
	(iii) TOTAL of contributions from individuals	0.00	766.00
(k	o) Political Party Committees	0.00	0.00
(0	c) Other Political Committees (such as PACs)	0.00	1000.00
(c (e	TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	1766.00
	RANSFERS FROM OTHER	0.00	0.00
Α	UTHORIZED COMMITTEES	0.00	0.00
	OANS: a) Made or Guaranteed by the		
(-	Candidate	0.00	0.00
(k	,	0.00	0.00
(0	c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
	OFFSETS TO OPERATING		
	XPENDITURES Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	650.87
1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	2416.87

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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COLUMN A COLUMN B II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 450.00 21173.11 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 2000.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 2000.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 450.00 23173.11 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 1449.08 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 0.00 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 1449.08 25. SUBTOTAL (add Line 23 and Line 24)..... 450.00 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 999.08 (subtract Line 26 from Line 25).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE NUMBER: (check only one)					PAG	ЭE	5	OF	10
Use separate schedule(s) for each category of the										
	7	K	17	18				19a		19b
Detailed Summary Page			20a		20b			20c		21
y not be sold or used by any person for the purpose of soliciting contributions										

Any information copied from such Reports a or for commercial purposes, other than usin				on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Paul Chabot Congress				
Full Name (Last, First, Middle Initial) A. Integrated Solution Political Mailing Address 4142 Adams Avenue				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Suite 103-550	T - T-			00 02 2011
City San Diego	State Z CA	Zip Code 92116		FEC Identification Number
Purpose of Disbursement Software			001	C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Senate President State: District:	Disbursement For: 201 Primary Other (specify	✗ General	3,50	Transaction ID : B-8699 Memo Item
Full Name (Last, First, Middle Initial) Integrated Solution Political Mailing Address 4142 Adams Avenue				Date of Disbursement M M M / D D / Y T Y T Y T Y T Y T Y T Y T Y T Y T Y
Suite 103-550 City	State Z	Zip Code 92116		FEC Identification Number
San Diego Purpose of Disbursement Software	CA	92116	001	C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Senate President State: District:	Disbursement For: 201 Primary Other (specify	✗ General		Transaction ID : B-8698 Memo Item
Full Name (Last, First, Middle Initial)				
Integrated Solution Political				Date of Disbursement
Mailing Address 4142 Adams Avenue Suite 103-550				04 04 2017
City San Diego	State Z	Zip Code 92116		FEC Identification Number
Purpose of Disbursement Software			001	C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Senate President State: District:	Disbursement For: 201 Primary Other (specify	✗ General		Transaction ID : B-8693 Memo Item
SUBTOTAL of Disbursements This Page (optional)		······	450.00
TOTAL This Period (last page this line nur	mber only)			450.00

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER: (check only one)

PAGE

6

13a 13b

OF

10

	committee (In Full) abot Congress				Trans	action ID : C-4783						
	ource Full Name (Last, pt, Paul, R, Dr.,	, First, Mic	ddle Initial)		☐ Memo Ite	m Election: 2014 x Primary General						
Mailing A PO Box 6	Address 665	Other (specify) ▼										
City	1		State TX	ZIP Cod 75071	de	Personal Funds of the Candidate						
	Il Amount of Loan		Cumulative Pa		Date B	alance Outstanding at Close of This Period						
	6200	00.00	2	,	41900.00	20100.00						
TERMS	Date Incurred			Date Due	Interest R (If none, en							
_M 03 _M	/ D06D / Y 2014		M12 M / P31 P		Ž016 ^Y	% (apr) Yes No						
	Endorsers or Guarantors Name (Last, First, Middle	` '	o Loan Source		Name of Employer							
	ng Address				Occupation							
IVIGIII	ng Address				Amount							
City		State	ZIP Code		Guaranteed Outstanding:	9						
2. Full N	lame (Last, First, Middle I	nitial)			Name of Employer							
Mailin	g Address				Occupation							
City		State	ZIP Code		Amount Guaranteed Outstanding:	, , , , , , ,						
3. Full N	lame (Last, First, Middle I	nitial)			Name of Employer							
Mailin	g Address				Occupation							
City		State	ZIP Code		Amount Guaranteed Outstanding:	, , , , , , ,						
4. Full N	lame (Last, First, Middle I	nitial)			Name of Employer							
Mailin	g Address				Occupation							
City		State	ZIP Code		Amount Guaranteed Outstanding:	9 9 9						
SUBTOTAL	S This Period This Page	(optional)				20100.00						
TOTALS Th	nis Period (last page in th	is line only	·) ·······		·····	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7						
Carry outs	tanding balance only to L	INE 3. Sch	nedule D. for this	s line. If	no Schedule D. carry fo	prward to appropriate line of Summary.						

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

10

			Detailed Guillinary	1 age	13b
NAME OF COMMITTEE (In Full) Paul Chabot Congress			Trar	nsaction ID : C-4785	
•				T	
LOAN SOURCE Full Name (Last, First, M	iddle Initial)		☐ Memo II		
Chabot, Paul, R, Dr.,				Primary General	
Mailing Address				General Other (specify) ▼	
PO Box 665					
City	State	ZIP Code			
McKinney	TX	75071		Personal Funds of the	Candidate
Original Amount of Loan	Cumulative Pa	ayment To Da	ate	Balance Outstanding at Close of	This Period
75000.00			33900.00	411	00.00
TERMS Date Incurred		Date Due	Interest		ed:
M ₀₉ M / D ₂₃ D / Y Ž014 Y	M ₁₂ M / D ₃₁ D) / Y 3	(If none, o	enter 0)	_
2014	-31	2	016 ^Y		es 🗶 No
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		١	Name of Employer		
Mailing Address		(Occupation		
		A	Amount		
City State	ZIP Code		Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		١	Name of Employer		
Mailing Address		(Occupation		
		A	Amount		_
City State	ZIP Code		Guaranteed Outstanding:	9 9	
3. Full Name (Last, First, Middle Initial)		١	Name of Employer		
Mailing Address		(Occupation		
		-	Amount		
City State	ZIP Code		Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
			Amount		
City State	ZIP Code		Guaranteed		
		(Outstanding:	9 9	
SUBTOTALS This Period This Page (optional)				A11	00.00
TOTALS This Period (last page in this line on					55.55
1 1 1				7	
Carry outstanding balance only to LINE 3, So	hedule D, for this	is 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 OF FOR LINE NUMBER: **X** 13a (check only one)

10

13b NAME OF COMMITTEE (In Full) Transaction ID: C-4784 Paul Chabot Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Chabot, Paul, R, Dr., General Mailing Address PO Box 665 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate TX 75071 McKinney Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 4500.00 0.00 4500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D29^D ^D31 ^D M 05M ž014 **2016** x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 4500.00 TOTALS This Period (last page in this line only) 65700.00 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

485.00

0.00

Amount Incurred This Period

Excluding Loans

NAME OF COMMITTEE (In Full)

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

PAGE 9
FOR LINE NUMBER: (check only one)

Outstanding Balance at Close of This Period

485.00

	9
X	10

10

Paul Chabot Con	gress		
A. Full Name (Last, First, Middle In	Nature of Debt (Purpose):		
Capital Campaigns Inc.			Fundraising Consulting and Expenses
Mailing Address 38 Executive Park Suite 390			
City	State	Zip Code	
Irvine	CA	92614-4730	
Outstanding Balance Beginning To	nis Period 32.44		Transaction ID : D-6666
Amount Incurred This Peri	od	Payment This Period	Outstanding Balance at Close of This Period
, , , , , ,	0.00	0.00	5062.44
B. Full Name (Last, First, Middle Init MGR Real Estate	Nature of Debt (Purpose): Rent		
Mailing Address 1461 E Cooley Dr Suite 205			
City	State	Zip Code	
Colton	CA	92324-3983	
Outstanding Balance Beginning T	his Period		Transaction ID : D-1895

	,		, , , , , , , , , , , , , , , , , , , ,
C. Full Name (Last, First, Middle Initial) of Del Capital Campaigns Inc.	Nature of Debt (Purpose): Fundraising Consulting		
Mailing Address 38 Executive Park Suite 390			
City	State	Zip Code	
Irvine	CA	92614-4730	
Outstanding Balance Beginning This Period			Transaction ID : D-6669
Amount Incurred This Period	P	ayment This Period	Outstanding Balance at Close of This Period
0.00	7	0.00	1250.00

Payment This Period

0.00

1)	SUBTOTALS This Period This Page (optional)			,	Ξ	Ξ	,	Ξ	679	7.44	
2)	TOTALS This Period (last page this line number only)	>		,		Ι	,				
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)	>		7	Ξ	Ι	7	Ι	Ξ		
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	>	Ξ	7		_	7	_	Ξ		

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

Exc

					or each (check only one) 9 bered line) x 10			
	ME OF COMMITTEE (In Full)				,		— [A] 10	
	Paul Chabot Congres	S						
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Media Inc. Mailing Address 1800 Diagonal Road Suite 600				Nature of Debt (Purpose): Email Marketing			
Ī	City	State	Zip Code					
-	Alexandria	VA	22314					
	Outstanding Balance Beginning This Period				Transaction ID : D-8694			
	1000.00							
	Amount Incurred This Period	Payment This Period			Outstanding Balance at Close of This Period			
	0.00		0.0	00			1000.00	
	7 7		, , , , ,			7	- 4	
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor				Nature of Debt (Purpose): Fundraising Consulting and Expenses			
	Capital Campaigns Inc.							
l	Mailing Address 38 Executive Park							
ŀ	Suite 390	State	Zip Code					
	City Irvine	CA	92614-4730					
ŀ	Outstanding Balance Beginning This Period 2362.44				Transaction ID : D-6668			
	Amount Incurred This Period Payment This Period				Outstanding Polones at Class of This Povind			
					Outstanding Balance at Close of This Period			
	0.00		0.0	00		, , , , , , , , , , , , , , , , , , , ,	2362.44	
ŀ	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor				Nature of Debt (Purpose):			
					Nature of D	est (ruipose).		
ŀ	Mailing Address							
	City	State	Zip Code					
-	Outstanding Release Regioning This Region							
	Outstanding Balance Beginning This Period							
	Amount Incurred This Period Payment This Period				Outstandi	ng Balance at Close	e of This Period	
1)	SUBTOTALS This Period This Page (optional)					7 7	3362.44	
2)	TOTALS This Period (last page this line number only)					, , ,	10159.88	
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)					, , ,	65700.00	
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)					7	75859.88	

PAGE 10 OF

FOR LINE NUMBER:

(Use separate schedule(s)