



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Paul Chabot Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	2266.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	2266.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	391.93	22348.04
(b) Total Offsets to Operating Expenditures (from Line 14).....	2000.00	4852.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	- 1608.07	17496.04
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>		
	1824.15	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	72507.88	

**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 05/2016)

Write or Type Committee Name

**Paul Chabot Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(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
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	2266.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	2000.00	4852.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	650.87
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	2000.00	7768.87

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	391.93	22348.04
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	391.93	27700.04

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	216.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2000.00
25. SUBTOTAL (add Line 23 and Line 24).....	2216.08
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	391.93
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1824.15

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

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

FOR LINE NUMBER: PAGE 5 OF 11  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
**Paul Chabot Congress**

**A.** Full Name (Last, First, Middle Initial)  
**South Bay Acceptance Corporation**

Mailing Address PO Box 2141

City Columbus State GA Zip Code 31902-2141

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
484.10

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2019

Transaction ID : **A-8720**

Amount of Each Receipt this Period  
 2000.00

Memo Item  
Refund on Insurance Deposit

**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) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**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) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2000.00

**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)		PAGE 6 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 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) <b>A. Integrated Solution Political</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2019	
Mailing Address 4142 Adams Avenue Suite 103-550			FEC Identification Number C	
City San Diego	State CA	Zip Code 92116	Amount of Each Disbursement this Period 241.93	
Purpose of Disbursement Software		Category/ Type 001	Transaction ID : B-8719	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Integrated Solution Political</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2019	
Mailing Address 4142 Adams Avenue Suite 103-550			FEC Identification Number C	
City San Diego	State CA	Zip Code 92116	Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement Software		Category/ Type 001	Transaction ID : B-8718	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	391.93
<b>TOTAL</b> This Period (last page this line number only).....▶	391.93

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

NAME OF COMMITTEE (In Full) **Paul Chabot Congress** Transaction ID : **C-4784**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Chabot, Paul, R, Dr.,		<input type="checkbox"/> Memo Item	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 6656			
City McKinney	State TX	ZIP Code 75071	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 4500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 4500.00
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<b>TERMS</b>	Date Incurred M 05 / D 29 / Y 2014	Date Due M 12 / D 31 / Y 2016	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	4500.00
<b>TOTALS</b> 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 C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Paul Chabot Congress** Transaction ID : **C-4783**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Chabot, Paul, R, Dr.,		<input type="checkbox"/> Memo Item	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 6656			
City McKinney	State TX	ZIP Code 75071	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 62000.00	Cumulative Payment To Date 45252.00	Balance Outstanding at Close of This Period 16748.00
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<b>TERMS</b>	Date Incurred M 03 / D 06 / Y 2014	Date Due M 12 / D 31 / Y 2016	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	16748.00
<b>TOTALS</b> 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 C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Paul Chabot Congress** Transaction ID : **C-4785**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Chabot, Paul, R, Dr.,		<input type="checkbox"/> Memo Item	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 6656			
City McKinney	State TX	ZIP Code 75071	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 75000.00	Cumulative Payment To Date 33900.00	Balance Outstanding at Close of This Period 41100.00
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<b>TERMS</b>	Date Incurred M 09 / D 23 / Y 2014	Date Due M 12 / D 31 / Y 2016	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	41100.00
<b>TOTALS</b> This Period (last page in this line only).....▶	62348.00

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**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Media Inc.</b>			Nature of Debt (Purpose): Email Marketing
Mailing Address 1800 Diagonal Road Suite 600			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 1000.00	Transaction ID : <b>D-8694</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Capital Campaigns Inc.</b>			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 5062.44	Transaction ID : <b>D-6666</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5062.44

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Capital Campaigns Inc.</b>			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 2362.44	Transaction ID : <b>D-6668</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2362.44

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	8424.88
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

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

NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MGR Real Estate</b>			Nature of Debt (Purpose): Rent
Mailing Address 1461 E Cooley Drive Suite 205			
City Colton	State CA	Zip Code 92324-3983	
Outstanding Balance Beginning This Period <input type="text" value="485.00"/>			

Amount Incurred This Period <input type="text" value="0.00"/>		Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="485.00"/>
<b>Transaction ID : D-1895</b>			

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Capital Campaigns Inc.</b>			Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 38 Executive Park Suite 390			
City Irvine	State CA	Zip Code 92614-4730	
Outstanding Balance Beginning This Period <input type="text" value="1250.00"/>			

Amount Incurred This Period <input type="text" value="0.00"/>		Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1250.00"/>
<b>Transaction ID : D-6669</b>			

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 <input type="text"/>			

Amount Incurred This Period <input type="text"/>		Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
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1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="1735.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="10159.88"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text" value="62348.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text" value="72507.88"/>