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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Au	uthorized Con	nmittee		(Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT		xample: If typing ver the lines.	, type	12FE4M5		
Paul Chabot Congres	S					ı	
ADDRESS (number and street)	12223 Highland	d Avenue					
▼	# 106-228	# 106-228					
Check if different than previously	Rancho Cucam	amonga CA 91739-2574					
reported. (ACC)		CITY A			STATE A	ZIP CODE ▲	
2. FEC IDENTIFICATION N	IUMBER ▼			,	51A1L –	ZIF GODL =	
C C00557884		3. IS THIS	√ NEW		AMENDE	STATE ▼ DISTRICT	
O coocie		REPORT	(N)	OR	(A)	CA 31	
4. TYPE OF REPORT (CI	hoose One)	(b) 12-Day PR I	E -Election Report	t for the:			
(a) Quarterly Reports:		П	Primary (12P)		General (12	G) Runoff (12R)	
April 15 Quarterly	Report (Q1)	- F		20)			
July 15 Quarterly	Report (Q2)		Convention (12	20)	Special (12	5)	
X October 15 Quarte	erly Report (Q3)	Election or	M M /	D D /	Y	in the State of	
January 31 Year-E	nd Report (YE)	(c) 30-Day PO	ST-Election Repo	ort for the:			
		П	General (30G)		Runoff (30F	Special (30S)	
Touristic Book	I. (TED)		derieral (600)		Transm (ser	., openia (eee)	
Termination Repor	t (IEH)	Election or	M M /	D D /	YYYY	in the State of	
5. Covering Period	OM / D D /	ү ү ү ү ү ү ү 2019	through	M M 09	/ D D / 30	y " y " y " y " 2019	
c. Covering Follow			anough	00	ų,	. =4,75	
I certify that I have examined t			nowledge and be	elief it is tr	ue, correct and	complete.	
Type or Print Name of Treasure	Lawler, Kelly, , er	· •					
Lan Signature of Treasurer	wler, Kelly, , ,		[Electronically Fi	led] [Date 10	/ 14 / Y Y Y Y Y Y Y 2019	
NOTE: Submission of false, error	neous, or incomplete	e information may	subject the perso	on signing t	this Report to the	penalties of 52 U.S.C. §30109	
Office							
Use Only						FEC FORM 3 (Revised 05/2016)	

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 11

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Paul Chabot Congress

2019 2019 09 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 2266.00 (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 2266.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 391.93 22348.04 (from Line 17) (b) Total Offsets to Operating 4852.00 2000.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 17496.04 -1608.07(subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 1824.15 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 72507.88 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

of Receipts

FEC Form 3 (Revised 05/2016)

PAGE 3 / 11

Write or Type Committee Name

Paul Chabot C	congress
---------------	----------

07 09 01 2019 30 2019 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 1000.00 (i) Itemized (use Schedule A)...... 266.00 0.00 (ii) Unitemized..... (iii) TOTAL of contributions 0.00 1266.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 1000.00 (such as PACs)..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 (add Lines 11(a)(iii), (b), (c), and (d))... 2266.00 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 2000.00 4852.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 650.87 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 2000.00 7768.87 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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	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.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	391.93	27700.04
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING 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 (fro	om Line 22)	391.93
27.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	1824.15

S

			,
SCHEDULE A (FEC Form 3) TEMIZED 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 11d 12 13a 13b 14 15
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Paul Chabot Congress			
Full Name (Last, First, Middle Initial) South Bay Acceptance Corporation Mailing Address PO Box 2141	1		Date of Receipt 08 01 2019
City State Columbus GA		Zip Code 31902-2141	08 01 2019 Transaction ID : A-8720
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer	Occupation	1	2000.00
Receipt For: 2016 Primary General Other (specify) ▼	Election C	ycle-to-Date ▼ 484.10	Memo Item Refund on Insurance Deposit
Full Name (Last, First, Middle Initial)	I		Date of Receipt
Mailing Address			M M / D D / Y Y Y Y
City	State	Zip Code	
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period		
Name of Employer	me of Employer Occupation		
Receipt For: Primary General Other (specify) ▼ Election Cycle-to-Date		ycle-to-Date	Memo Item
Full Name (Last, First, Middle Initial)	l.		Date of Receipt
Mailing Address			M M / D D / Y Y Y Y
City	State	Zip Code	
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer	Occupation	ı	
Receipt For: Primary General Other (specify) ▼	Election C	ycle-to-Date	Memo Item
SUBTOTAL of Receipts This Page (optional)			2000.00

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

2000.00

SCHEDULE B (FEC Form 3)

PAGE 6 11 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20b 20c

ITEMIZED DISBURSEMENTS 19b 20a 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) Date of Disbursement Integrated Solution Political 08 2019 02 Mailing Address 4142 Adams Avenue Suite 103-550 City State Zip Code **FEC Identification Number** CA San Diego 92116 Purpose of Disbursement Software 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2018 241.93 Office Sought: House Senate Primary General Transaction ID: B-8719 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) Integrated Solution Political Date of Disbursement Mailing Address 4142 Adams Avenue 04 2019 Suite 103-550 City State Zip Code **FEC Identification Number** CA San Diego 92116 Purpose of Disbursement 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 150.00 Disbursement For: Office Sought: House 2018 Senate Primary General Transaction ID: B-8718 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 391.93 TOTAL This Period (last page this line number only)..... 391.93

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)

11

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 6656 Other (specify) 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 City State ZIP Code 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)..... 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**

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

PAGE OF FOR LINE NUMBER: **X** 13a (check only one)

11

13b NAME OF COMMITTEE (In Full) Transaction ID: C-4783 Paul Chabot Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Chabot, Paul, R, Dr., General Mailing Address Other (specify) PO Box 6656 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 62000.00 45252.00 16748.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D06D ^D31 ^D M 03M 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 State ZIP Code City 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)..... 16748.00 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 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)

11

13b NAME OF COMMITTEE (In Full) Transaction ID: C-4785 Paul Chabot Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Chabot, Paul, R, Dr., General X Mailing Address Other (specify) PO Box 6656 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 75000.00 33900.00 41100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D23^D ^D31 ^D M09M 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 State ZIP Code City 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)..... 41100.00 TOTALS 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**

Excl

1)

2)

3)

4)

NAI

	`	,
Paul	Chabot	Congress

luding Loans			numbered line)	x 10	
ME OF COMMITTEE (In Full)					
aul Chabot Congres	SS				
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor				Nature of Debt (Purpose):	
Political Media Inc.				eting	
Mailing Address 1800 Diagonal Road Suite 600					
City	State	Zip Code			
Alexandria	VA	22314			
Outstanding Balance Beginning This Period	d		Transactio	on ID : D-8694	
1000.00					
Amount Incurred This Period		Payment This Period	Outstandir	ng Balance at Close of This Period	
0.00		0.0	00	1000.00	
B. Full Name (Last, First, Middle Initial) of De	btor or Cred	litor	Nature of De	ebt (Purpose):	
Capital Campaigns Inc.				g Consulting and Expenses	
Mailing Address 38 Executive Park Suite 390					
City	State	Zip Code			
Irvine	CA	92614-4730			
Outstanding Balance Beginning This Period	ł		Transactio	on ID : D-6666	
5062.44					
Amount Incurred This Period	Amount Incurred This Period Payment This Period		Outstandir	ng Balance at Close of This Period	
0.00		0.0	00	5062.44	
C. Full Name (Last, First, Middle Initial) of D	ebtor or Cre	ditor		ebt (Purpose):	
Capital Campaigns Inc.			Fundraising	g Consulting and Expenses	
Mailing Address 38 Executive Park Suite 390					
City	State	Zip Code			
Irvine	CA	92614-4730			
Outstanding Balance Beginning This Period	t		Transacti	on ID : D-6668	
2362.44					
Amount Incurred This Period Payment This Period			Outstandir	ng Balance at Close of This Period	
0.00		, , 0.0	00	2362.44	
SUBTOTALS This Period This Page (optional	al)		•	8424.88	
				J J	
TOTALS This Period (last page this line num	nber only) ·····			, , , , , , , , , , , , , , , , , , , ,	
TOTAL OUTSTANDING LOANS from Scheo	lule C (last p	page only)	···· }	, , , , , , , , , , , , , , , , , , , ,	
ADD 2) and 3) and carry forward to approp	riate line of	Summary Page (last page o	nly) 🕨	7	

PAGE

FOR LINE NUMBER:

(check only one)

(Use separate schedule(s)

for each

10 OF

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 11 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

11

NAME OF COMMITTEE (In Full)

Paul Chahot Congress

Paul Chabot Congres	SS			
A. Full Name (Last, First, Middle Initial) of DMGR Real Estate	Nature of Debt (Purpose): Rent			
Mailing Address 1461 E Cooley Drive Suite 205			-	
City State Zip Code Colton CA 92324-3983			_	
Outstanding Balance Beginning This Period	d		Transaction ID : D-1895	
485.00				
Amount Incurred This Period	Amount Incurred This Period Payment This Period		Outstanding Balance at Close of This Period	
0.00		0.00	485.00	
B. Full Name (Last, First, Middle Initial) of De Capital Campaigns Inc.	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital Campaigns Inc.			
Mailing Address 38 Executive Park Suite 390		_		
City Irvine	State CA	Zip Code 92614-4730		
Outstanding Balance Beginning This Period 1250.00 Amount Incurred This Period 0.00		Payment This Period 0.00	Transaction ID : D-6669 Outstanding Balance at Close of This Period 1250.00	
C. Full Name (Last, First, Middle Initial) of D	ebtor or Cre	editor	Nature of Debt (Purpose):	
Mailing Address			_	
City	State	Zip Code		
Outstanding Balance Beginning This Period	d			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
1) SUBTOTALS This Period This Page (optional	al)		1735.00	
TOTALS This Period (last page this line number only)			10159.88	
TOTAL OUTSTANDING LOANS from Schedule C (last page only)			62348.00	
4) ADD 2) and 3) and carry forward to approp	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)			