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January 17, 2012

Federal Election Commission
999 E Street NW
Washington, DC 20463

To Whom It May Concern:

I have enclosed FEC Form 3 for the period ending December 31, 2011 for Doyle for Congress Texas 36.

I gave it my best effort, after reading everything I could find in the way of instructions and printing out samples of other candidates filing FEC Form 3. I hope you find everything as it should be.

Patricia Koimn

Pat Koimn
Treasurer
Doyle for Congress Texas 36

12030712632

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED

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Office Use Only

FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

DOYLE, FOR CONGRESS, TEXAS, 36

ADDRESS (number and street)

1003 KNOWLTON

Check if different than previously reported. (ACC)

BAYTOWN

TX

77520

2. FEC IDENTIFICATION NUMBER ▼

C 00507715

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

ZIP CODE ▲

STATE ▼ DISTRICT

TX

36

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

X January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on 04 / 03 / 2012

in the State of TX

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on M M / D D / Y Y Y Y

in the State of

5. Covering Period M M / D D / Y Y Y Y 09 01 2011 through M M / D D / Y Y Y Y 12 31 2011

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 PATRICIA KOIMN

Signature of Treasurer

Patricia Koimn

Date

01 / 17 / 2012

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

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

DOYLE FOR CONGRESS TEXAS 36

Report Covering the Period:

From:

09 / 01 / 2011

To:

12 / 31 / 2011

	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))....	50.00	
(b) Total Contribution Refunds (from Line 20(d))	0.00	
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	50.00	
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3,484.69	
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3,484.69	
8. Cash on Hand at Close of Reporting Period (from Line 27).....	550.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

DOYLE FOR CONGRESS TEXAS 36

Report Covering the Period: From: ^M09 ^M / ^D01 / ^Y2011 To: ^M12 ^M / ^D31 / ^Y2011

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).....

0.00

(ii) Unitemized.....

50.00

(iii) TOTAL of contributions
from individuals ▶

50.00

(b) Political Party Committees.....

0.00

(c) Other Political Committees
(such as PACs).....

0.00

(d) The Candidate.....

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

50.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

3,984.69

(b) All Other Loans.....

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

3,984.69

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

4,034.69

12030712635

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.....	3,484.69	
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	
(b) Of All Other Loans	0.00	
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	
(b) Political Party Committees.....	0.00	
(c) Other Political Committees (such as PACs).....	0.00	
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	
21. OTHER DISBURSEMENTS	0.00	
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	3,484.69	

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4,034.69
25. SUBTOTAL (add Line 23 and Line 24).....	4,034.69
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3,484.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	550.00

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 5 OF 10	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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) DOYLE FOR CONGRESS TEXAS 36
--

Full Name (Last, First, Middle Initial) A. LOU-ANN WILKINSON		Date of Receipt M M / D D / Y Y Y Y 12 19 2011
Mailing Address 342 PLYMOUTH BROWN RD.		Amount of Each Receipt this Period 50.00
City ASHTABULA	State OH	
Zip Code 44004		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		
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	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		
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).....	50.00
TOTAL This Period (last page this line number only).....	50.00

12030712637

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 10

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

DOYLE FOR CONGRESS TEXAS 36

Full Name (Last, First, Middle Initial)

A. SECRETARY OF STATE

Mailing Address

1019 BRAZOS

City

AUSTIN

State

TX

Zip Code

78701

Purpose of Disbursement

FILING FEE

001

Candidate Name

JERRY DOYLE

Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For:

☒

Primary

☐

General

☐

Other (specify)

State: TX

District: 36

Date of Disbursement

11 / 29 / 2011

Amount of Each Disbursement this Period

3,125.00

B. VALERIE ADAME PHOTOGRAPHY

Mailing Address

6920 BAYWAY

City

BAYTOWN

State

TX

Zip Code

77520

Purpose of Disbursement

PHOTOS FOR CAMPAIGN

006

Candidate Name

JERRY DOYLE

Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For:

☒

Primary

☐

General

☐

Other (specify)

State: TX

District: 36

Date of Disbursement

11 / 28 / 2011

Amount of Each Disbursement this Period

297.69

C. BAYTOWN MPO

Mailing Address

601 W. BAKER RD.

City

BAYTOWN

State

TX

Zip Code

77521

Purpose of Disbursement

OPEN POST OFFICE BOX

001

Candidate Name

JERRY DOYLE

Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For:

☒

Primary

☐

General

☐

Other (specify)

State: TX

District: 36

Date of Disbursement

10 / 04 / 2011

Amount of Each Disbursement this Period

62.00

SUBTOTAL of Disbursements This Page (optional)

3,484.69

TOTAL This Period (last page this line number only)

3,484.69

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 7 OF 10

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

DOYLE FOR CONGRESS TEXAS 36

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

DOYLE, JERRY L. (Received from Candidates
Personal Funds)

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

1003 KNOWLTON

City

State

ZIP Code

BAYTOWN

TX

77520

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

500.00

NONE

500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

12 / 06 / 2011

NONE

0.00 % (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)..... ▶

500.00

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.

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SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 9 OF 10

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

DOYLE FOR CONGRESS TEXAS 36

LOAN SOURCE Full Name (Last, First, Middle Initial)
DOYLE, JERRY L. (Received from Candidates
Personal funds)

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address
1003 KNOWLTON

City State ZIP Code
BAYTOWN, TX 77520

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
\$ 297 .69	NONE	\$ 297 .69

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 11 / 28 / 2011	MM / DD / YYYY NONE	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)..... ▶ \$ 297 .69

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 10 OF 10

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

DOYLE FOR CONGRESS TEXAS 36

LOAN SOURCE Full Name (Last, First, Middle Initial)
DOYLE, JERRY L. (Received from Candidates
personal funds)

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

1003 KNOWLTON

City

BAYTOWN

State

TX

ZIP Code

77520

Original Amount of Loan

62.00

Cumulative Payment To Date

NONE

Balance Outstanding at Close of This Period

62.00

TERMS

Date Incurred

10 / 04 / 2011

Date Due

NONE

Interest Rate

% (apr)

Secured:

☐ 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)..... ▶

62.00


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

3,984.69

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER
(3/2005)

1/23/12
DATE PREPARED

12030712643