

REPORT OF RECEIPTS

E. / NEDRA -2 I	SBURSEMENTS FEC AAIL CE Authorized Committee	NTER
NAME OF TYPE OR PRIN COMMITTEE (in full)	Example: If typing, type 1.2 FE 2 over the lines.	1M5
Elaine Withoutham	WILLIAMS FOR PRESIDE	ENTITULE
ADDRESS (number and street)	EVERGLADE ST	
Check if different than previously reported. (ACC)	CITY ▲ STATE ▲	32-920- L
2. FEC IDENTIFICATION NUMBER ▼	SIAIE -	ZIF CODE -
<u> </u>	3. IS THIS NEW (N) OR (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2)		ral (12G) Runoff (12R)
October 15 Quarterly Report (Q3)	Election on	in the State of
January 31 Year-End Report (YE)	(c) 30-Day POST -Election Report for the: General (30G) Runof	ff (30R) Special (30S)
Termination Report (TER)	Election on Election on	in the State of
5. Covering Period	1 DOLLO through DT 1 LS	3 <u>80 10</u>
Type or Print Name of Treasurer	to the best of my knowledge and belief it is true, correctly when we will any	t and complete.
Signature of Treasurer	Date	58 13 12016
	ete information may subject the person signing this Report	to the penalties of 52 U.S.C. §30109
Office Use Only		FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

w _	rite or Type Committee Name	in Williams for Per	Esident 2016
Re	eport Covering the Period: From:	TOUS DOLL	M M / P T / M A (*) Y
6	Not Contributions (other than loops)	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))		5,000.00
	(b) Total Contribution Refunds (from Line 20(d))		
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	000	L 5000ab
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	24000	450.00
	(b) Total Offsets to Operating Expenditures (from Line 14)		, 00
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	2400	450.00
8.	Cash on Hand at Close of Reporting Period (from Line 27)	A# 92.00	•
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on 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

2016 - 10 - 05 - 05 - 00100657

DETAILED SUMMARY PAGE

of Receipts FEC Form 3 (Revised 12/2003) Write or Type Committee Name Williams for President 2016 Whicham From: Report Covering the Period: **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 (i) Itemized (use Schedule A)..... (ii) Unitemized (iii) TOTAL of contributions from individuals (b) Political Party Committees..... Other Political Committees (such as PACs) (d) The Candidate TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))... 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the Candidate..... (b) All Other Loans..... (c) TOTAL LOANS (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** (Refunds, Rebates, etc.) 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....



FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

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

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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one) 11a 11b 11c 11d 11d 12 13a 13b 14 15		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may not be sold or used by any pe and address of any political committee	person for the purpose of soliciting contributions		
	n Williams for	Aresident 2016		
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address		(TO 10) (TO 10)		
City St	ate Zip Code			
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period		
Name of Employer Occ	upation			
Receipt For: Primary General Other (specify) ▼	ction Cycle-to-Date	Memo Item		
Full Name (Last, First, Middle Initial)		Date of Receipt		
B. Mailing Address	MAM / DAD / AAAAAA			
City	ate Zip Code			
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period		
Name of Employer Occ	upation			
Receipt For: Primary General Other (specify) ▼	ction Cycle-to-Date	Memo Item		
Full Name (Last, First, Middle Initial)		Date of Receipt		
C. Mailing Address	Mailing Address			
City	ate Zip Code			
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period		
Name of Employer Occ	pupation			
Receipt For:	ction Cycle-to-Date	Memo Item		

Primary

Other (specify) ▼

General

SUBTOTAL of Receipts This Page (optional).....

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

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		(FEC Form 3) SBURSEMENTS		Use separate sch for each category Detailed Summan	of the		R LINE NUMBER: PAGE OF eck only one) 17 18 19a 19b 20a 20b 20c 21
	for commercial pu	urposes, other than using the name					on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMM	Taine WHIGHA	M	DILLIP	rus for	\ -	PRENDENT 2016
_		First, Middle Initial)			_ 		Date of Disbursement
A.	Mailing Address	AM BULLDES				_	Date of Disbursement
	City	Sta	ate	Zip Code		-	Amount of Each Disbursement this Period
	D					_	
	Purpose of Disbu	rsement					
	Candidate Name				Category, Type	'	Memo Item
	Office Sought:		rimary	: General pecify) ▼			WEBSAE
_	State:	District:				_	
В.	Full Name (Last,	First, Middle Initial)					Date of Disbursement
	Mailing Address						M M / D D / Y Y Y Y
	City	St	ate	Zip Code			Amount of Each Disbursement this Period
	Purpose of Disbu	rsement				7	
	Candidate Name				Category Type	/	Memo Item
	Office Sought:		rimary				
_	State:	District:				_	
C.	Full Name (Last,	First, Middle Initial)					Date of Disbursement
	Mailing Address					_	M M / D D / Y Y Y Y
	City	State	Zi	p Code		_	Amount of Each Disbursement this Period
	Purpose of Disbursement				7		
	Candidate Name				Category Type	/	Memo Item
	Office Sought:	President C	rimary				
_	State:	District:					
S	SUBTOTAL of Dist	oursements This Page (optional)	<u></u>			<u></u>	
Ţ	OTAL This Period	(last page this line number only)				•	

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SCHEDULE C (FEC Form 3) LOANS

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

PAGE	<u>۵</u> ۲	
FOR LINE NUMBER: (check only one)		13a 13b
		100

AME OF COMMITTEE (IN FUII) EIGHTE WHICH	nom will	llams for PRESIDENT 2016		
LOAN SOURCE Full Name (Last, First, N	diddle Initial)	Memo Item Election: Primary General		
Mailing Address		Other (specify) ▼		
City	State ZIP Co	ode .		
Original Amount of Loan	Cumulative Payment To	Date Balance Outstanding at Close of This Period		
TERMS Date Incurred	Date Due	Interest Rate Secured:		
M M / D D / Y Y Y Y Y	M M / D D / Y	% (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)				
TOTALS This Period (last page in this line o	nly)			
Carry outstanding balance only to LINE 3, 5	Schedule D, for this line. If	no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page _____ of Schedule C

Federal Election Commission, Washington, D.C. 20463						
NAME OF COMMITTEE (In Full)	\sim	FEC IDENTIFICATION NUMBER				
Eigine Whigham Williams	for theisident	cl00558 995				
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)				
Full Name		%				
Mailing Address	Date Incurred or Established	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
City State Zip Code	Date Due					
A. Has loan been restructured? No Yes	If yes, date originally incurred	May / Gro / Array				
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:					
C. Are other parties secondarily liable for the debt incurr. No Yes (Endorsers and guarantors mu	ed? est be reported on Schedule C.)	·				
property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? No Yes If yes, specify: Does the lender have a perfected security					
		erest in it? No Yes				
E. Are any future contributions or future receipts of interest collateral for the loan? No Yes If yes, s	· • • • • • • • • • • • • • • • • • • •	/hat is the estimated value?				
	Location of account:					
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).						
	Address:					
Date account established:	City, State, Zip:					
F. If neither of the types of collateral described above we exceed the loan amount, state the basis upon which	as pledged for this loan, or if the this loan was made and the basis	amount pledged does not equal or on which it assures repayment.				
G. COMMITTEE TREASURER		DATE				
Typed Name Signature		Waw \ Dag \ Araray				
H. Attach a signed copy of the loan agreement.						
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the to are accurate as stated above. II. The loan was made on terms and conditions (inclusimilar extensions of credit to other borrowers of III. This institution is aware of the requirement that complied with the requirements set forth at 11.00.	ding interest rate) no more favorable f comparable credit worthiness. a loan must be made on a basis of the comparable credit worthiness.	e at the time than those imposed for which assures repayment, and has				
AUTHORIZED REPRESENTATIVE		DATE				
Typed Name Signature Tit	le :	MAN \ DAD \ LALALAL				

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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.				
Hand Delivered	Date of Receipt			
Postmarked USPS First Class Mail	Date of Receipt			
USPS Registered/Certified	Postmarked (R/C)			
USPS Priority Mail	Póstmarked			
LIODO Die it. Meil Franzes	Postmarked			
USPS Priority Mail Express	·			
Postmark Illegible	·			
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Next Bus	iness Day Delivery			
Received from House Records & Registration Office	Date of Receipt			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	of Receipt or Postmarked			
En .	10/3/16			
PREPARER (3/2015)	DATE PREPARED			