

**FEC
FORM 3X**

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

RECEIVED

2014 APR 21 AM 11:31
Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

FEC MAIL CENTER

MEDICINAL CANNABIS SUPER PAC

ADDRESS (number and street)

505 145T



Check if different
than previously
reported. (ACC)

SUITE 900

OAKLAND

CA

94612-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00534529

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT
(Choose One)

(a) Quarterly Reports:



April 15
Quarterly Report (Q1)



July 15
Quarterly Report (Q2)



October 15
Quarterly Report (Q3)



January 31
Year-End Report (YE)



July 31 Mid-Year
Report (Non-election
Year Only) (MY)



Termination Report
(TER)

(b) Monthly
Report
Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)
(Non-Election
Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)
(Non-Election
Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

in the
State of

State

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

in the
State of

State

5. Covering Period

01 / 01 / 2014

through

03 / 31 / 2014

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

JOSEPH C HOUSTON

Signature of Treasurer

Joseph C Houston

Date

04 / 14 / 2014

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 3X
Rev. 12/2004

14031223709

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Medicinal Cannabis Superpac

Report Covering the Period:

From:

01 / 01 / 2014

To:

03 / 31 / 2014

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand
January 1, 781

300145

(b) Cash on Hand at
Beginning of Reporting Period.....

78113

(c) Total Receipts (from Line 19)

4517035

4517035

(d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B)

7. Total Disbursements (from Line 31)

4295003

4295003

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d))

300145

300145

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)

4829752



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

14031223710

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Medicinal Cannabis Superpac

Report Covering the Period:

From:

01/01/2014

To:

03/31/2014

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

00

00

(ii) Unitemized.....

00

00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

00

00

(b) Political Party Committees.....

00

00

(c) Other Political Committees

(such as PACs).....

00

00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

00

00

12. Transfers From Affiliated/Other

Party Committees.....

00

00

13. All Loans Received.....

4517035

4517035

14. Loan Repayments Received.....

00

00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

00

00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

00

00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

00

00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

00

00

(b) Levin Funds (from Schedule H5).....

00

00

(c) Total Transfers (add 18(a) and 18(b))..

00

00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

4517035

4517035

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

4517035

4517035

14031223711

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:
 (a) Allocated Federal/Non-Federal Activity (from Schedule H4)
 (i) Federal Share

00

00

- (ii) Non-Federal Share

00

00

- (b) Other Federal Operating Expenditures

00

00

- (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶

00

00

22. Transfers to Affiliated/Other Party Committees

00

00

23. Contributions to Federal Candidates/Committees and Other Political Committees

00

00

24. Independent Expenditures (use Schedule E)

00

00

25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)

00

00

26. Loan Repayments Made

465251

465251

27. Loans Made

00

00

28. Refunds of Contributions To:
 (a) Individuals/Persons Other Than Political Committees

00

00

- (b) Political Party Committees

00

00

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

00

00

- (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶

00

00

29. Other Disbursements

38297.52

38297.52

30. Federal Election Activity (2 U.S.C. §431(20))

- (a) Allocated Federal Election Activity (from Schedule H6)

- (i) Federal Share

00

00

- (ii) "Levin" Share

00

00

- (b) Federal Election Activity Paid Entirely With Federal Funds

00

00

- (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶

00

00

31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..

4295003

4295003

32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶

4295003

4295003

14031223712

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex-
penditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

33. Total Contributions (other than loans)
(from Line 11(d), page 3)
34. Total Contribution Refunds
(from Line 28(d))
35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b))▶
37. Offsets to Operating Expenditures
(from Line 15, page 3)
38. Net Operating Expenditures
(subtract Line 37 from Line 36)▶

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14031223713

SCHEDULE C (FEC Form 3X)

LOANS

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

PAGE 1 OF 3
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Medicinal Cannabis Superpac

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

HOUSTON JOSEPH C

Election:

☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

1182 24th St

City

Oakland

State

CA

ZIP Code

94607

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1002000

0

1002000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

12 / 08 / 2013

0

0 % (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:

0

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

0

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

0

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

0

SUBTOTALS This Period This Page (optional) ▶

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.

14031223714

SCHEDULE C (FEC Form 3X)

LOANS

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

PAGE 2 OF 3

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Medicinal Cannabis Superpac

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

HOUSTON, JOSEPH C

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

1182 24th st

City

Oakland

State

Ca

ZIP Code

94607

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

27000.00

0

27000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

01/03/2014

0% (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 only)

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

14031223715

SCHEDULE C (FEC Form 3X)

LOANS

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

PAGE 3 OF 3
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Medicinal Cannabis Superpac

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

HOUSTON, JOSEPH C

Election:

☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

1182 24th st

City *Oakland*

State *ca*

ZIP Code

94607

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1817035

965251

1351784

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

01/23/2014

01/23/2014

01/23/2014

0

0 % (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 only)

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

14031223716

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PRESS FIRMLY TO SEAL

PRIORITY®



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PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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USPS



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7013 2250 0001 5960 6474

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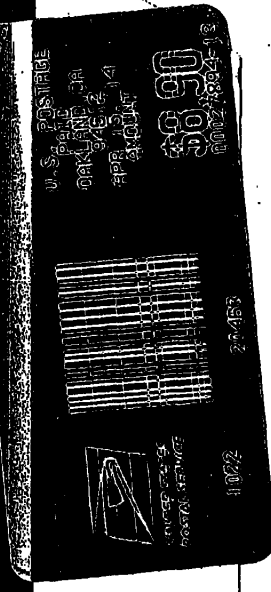
EP14F July 2013
OD: 12.5 x 9.5

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FROM: MEDICINAL CANNABIS SUPER PAC
505 14TH ST, STE. 900
OAKLAND, CA 94612

TO: FEDERAL ELECTION COMMISSION
999 E STREET, NW
WASHINGTON, DC 20543



Federal Election Commission
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PREPARER

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14031223718