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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

PONIVI 3	For An Aut	horized Com	nmittee	C	Office Use Only
NAME OF TO COMMITTEE (in full)	YPE OR PRINT		cample: If typing, type ver the lines.	12FE4M5	
Paul Chabot Congress					1
ADDRESS (number and street)	12223 Highland A	venue			
▼ Check if different	# 106-228				
than previously reported. (ACC)	Rancho Cucamon	ga 		CA 9	1739-2574
		CITY ▲		STATE A	ZIP CODE ▲
2. FEC IDENTIFICATION NUM	IREK A				STATE ▼ DISTRICT
C C00557884		3. IS THIS REPORT	NEW (N) OR	AMENDE (A)	
4. TYPE OF REPORT (Choose	se One)				
(a) Quarterly Reports:	(b) 12-Day PRE	-Election Report for t	he:	
	. (0.1)		Primary (12P)	General (120	G) Runoff (12R)
April 15 Quarterly Rep	port (Q1)		Convention (12C)	Special (125	S)
July 15 Quarterly Rep	ort (Q2)		, ,		
October 15 Quarterly	Report (Q3)	Election on	M M / D I	/ Y Y Y Y	in the State of
January 31 Year-End	Report (YE) (c	30-Day PO	ST-Election Report for	the:	
_		, 00 Bay 1 00)
			General (30G)	Runoff (30R) Special (30S)
Termination Report (T	ER)	Election on	M M / D E) / Y Y Y Y	in the State of
5. Covering Period 07	/ 01 / N	2017 Y	through	09 / D D / 30	Y Y Y Y Y Z017
I certify that I have examined this Type or Print Name of Treasurer	Report and to the Lawler, Kelly, , ,	e best of my ki	nowledge and belief it	is true, correct and o	complete.
	Kelly, , ,		[Electronically Filed]	Date 10	/ D D / Y Y Y Y Y Y 12 12 2017
NOTE: Submission of false, erroneou	ıs, or incomplete i	nformation may	subject the person sign	ning 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

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Paul Chabot Congress

2017 2017 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) 500.00 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) 500.00 2266.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 450.00 21623.11 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 21623.11 450.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 1049.08 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 75859.88 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)

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Write or Type Committee Name **Paul Chabot Congress** 07 2017 09 30 2017 Report Covering the Period: From: To:

	I. RECEIPTS	RECEIPTS COLUMN A Total This Period		
11.	CONTRIBUTIONS (other than loans) FROM:			
	(a) Individuals/Persons Other Than			
	Political Committees (i) Itemized (use Schedule A)	500.00	1000.00	
	(ii) Unitemized	0.00	266.00	
	(iii) TOTAL of contributions from individuals	500.00	1266.00	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	1000.00	
	(d) The Candidate(e) TOTAL CONTRIBUTIONS	0.00	0.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	500.00	2266.00	
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
3.	LOANS:			
	(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	
	OFFSETS TO OPERATING			
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00	
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	650.87	
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	500.00	2916.87	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	450.00	21623.11
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	2000.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	2000.00
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)	450.00	23623.11
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	999.08
24	TOTAL RECEIPTS THIS PERIOD (from Line 1	6, page 3)	500.00
25.	SUBTOTAL (add Line 23 and Line 24)		1499.08
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	450.00
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		1049.08

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SCHEDULE A (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:					PAGE		ວ	UF		11		
(c	(check only one)											
	X	11a		11b		11c		11	d			
		12		13a		13h		14			15	

ITEMIZED RECEIPTS **Detailed Summary Page** 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) Thorsen, Carl, , , Date of Receipt Mailing Address 4407 Highland Avenue 2017 28 City State Zip Code Transaction ID: A-8704 MD 20814 Bethesda FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation Thorsen-French Advocacy Attorney Memo Item Receipt For: 2016 Election Cycle-to-Date **Debt Retirement x** Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 500.00

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

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 20a 20b 20c

ITEMIZED DISBURSEMENTS 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) Date of Disbursement Integrated Solution Political 2017 05 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: 2016 150.00 Office Sought: House Senate Primary ✗ General Transaction ID: B-8700 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) Integrated Solution Political Date of Disbursement Mailing Address 4142 Adams Avenue 2017 06 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 Office Sought: House Disbursement For: 2016 ✗ General Senate Primary Transaction ID: B-8703 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) C. Integrated Solution Political Date of Disbursement Mailing Address 4142 Adams Avenue 2017 Suite 103-550 City State Zip Code **FEC Identification Number** San Diego CA 92116 Purpose of Disbursement 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 150.00 Office Sought: Disbursement For: 2016 House ★ General Senate Primary Transaction ID: B-8702 President Other (specify) Memo Item State: District: 00 SUBTOTAL of Disbursements This Page (optional)..... 450.00 TOTAL This Period (last page this line number only)..... 450.00

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER: (check only one)

PAGE

13a

OF

11

						130			
	ME OF COMMITTEE (In Full) aul Chabot Congress				Transa	action ID : C-4783			
	LOAN SOURCE Full Name (Last, Chabot, Paul, R, Dr.,	First, Mic	ddle Initial)	☐ Memo Iten	Election: 2014 X Primary General				
	Mailing Address PO Box 6656				Other (specify)				
	City McKinney		State ZIP Code TX 75071 Cumulative Payment To Date Balar			Personal Funds of the Candidate			
ľ	Original Amount of Loan					 ance Outstanding at Close of This Period			
	62000	.00	outhinative ray	yment 10	41900.00 20100.00				
Ī	TERMS Date Incurred		D	Date Due	Interest Ra (If none, ent				
	M03 ^M / D06 ^D / Ž014	Υ	M12 M / D31 D	/ Y	y ž016 y 0.00				
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer				
	Mailing Address				Occupation				
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
	2. Full Name (Last, First, Middle In	itial)			Name of Employer Occupation				
	Mailing Address								
-		I	T		Amount Guaranteed				
	City	State	ZIP Code			9 9 9			
	3. Full Name (Last, First, Middle In	itial)			Name of Employer Occupation				
	Mailing Address								
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
ŀ	4. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7 7			
SU	IBTOTALS This Period This Page (optional)				20100.00			
то	TALS This Period (last page in this	line only	·) ······			7 7 7			
C	arry outstanding balance only to LI	NE 3. Sch	nedule D. for this	s line. If	no Schedule D. carry for	ward to appropriate line of Summary.			
, 50	and contained balance only to Li	0, 001	.caa.c D, ioi ulis	oio. 11	Joneanie D, Carry IU	to appropriate into or outlinely.			

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 8
FOR LINE NUMBER: (check only one)

13a

OF

11

						130			
	ME OF COMMITTEE (In Full) aul Chabot Congress				Trans	action ID : C-4784			
		F:				T=:			
	LOAN SOURCE Full Name (Last, Chabot, Paul, R, Dr.,	First, Mic	idie initial)		☐ Memo Item				
	Mailing Address PO Box 6656					General Other (specify) ▼			
City			State ZIP Code TX 75071			✗ Personal Funds of the Candidate			
	McKinney		TX		To see that I alway of the Gallatate				
	Original Amount of Loan		Cumulative Pay	yment To		alance Outstanding at Close of This Period			
	4500	0.00			0.00	4500.00			
	TERMS Date Incurred		D	ate Due	Interest R (If none, en				
	M05 ^M / D29 ^D / Y Ž014	Υ	M12 M / D31 D	/ Y	° 2016 ° 0.00				
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	TAIR CODE		Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·				
	2. Full Name (Last, First, Middle In	itial)	1		Name of Employer				
	Mailing Address				Occupation				
					Amount Guaranteed Outstanding: Name of Employer				
	City	State	ZIP Code						
	3. Full Name (Last, First, Middle In	itial)							
	Mailing Address				Occupation				
		_			Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7 7 7			
	4. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
				Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	7 7			
			•						
S	UBTOTALS This Period This Page (optional)			······	4500.00			
T	OTALS This Period (last page in this	line only	r)		······	7			
_	Carry outstanding balance only to LII	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry fo	orward to appropriate line of Summary.			
	<u> </u>								

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

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

PAGE 9 OF FOR LINE NUMBER: (check only one)

X 13a 13b

11

		100
NAME OF COMMITTEE (In Full) Paul Chabot Congress		Transaction ID : C-4785
LOAN SOURCE Full Name (Last, First, M Chabot, Paul, R, Dr.,	Memo Item Election: 2014 Primary General	
Mailing Address PO Box 6656		Other (specify) ▼
City McKinney	State	ZIP Code 75071 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	
75000.00	Cumulative Fa	33900.00 41100.00
TERMS Date Incurred	Г	ate Due Interest Rate Secured:
M09 ^M / D23 ^D / Y Ž014 Y	M12 M / D31 D	/ Y Ž016 Y 0.00
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
	Zii Oodc	Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
,	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		41100.00
TOTALS This Period (last page in this line on	ly)	65700.00
Carry outstanding balance only to LINE 3, So	chedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

Excluding Loans

1)

2)

3)

4)

NAI

P

ME OF COMMITTEE (IN FUII) Paul Chabot Congres	SS			
A. Full Name (Last, First, Middle Initial) of De MGR Real Estate		ditor	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	l		Transaction ID : D-1895	
485.00				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00	485.00			
B. Full Name (Last, First, Middle Initial) of De	btor or Cred	itor	Nature of Debt (Purpose):	
Capital Campaigns Inc.			Fundraising Consulting and Expenses	
Mailing Address 38 Executive Park Suite 390				
City				
Irvine				
Outstanding Balance Beginning This Period 5062.44			Transaction ID : D-6666	
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	5062.44	
C. Full Name (Last, First, Middle Initial) of De	ebtor or Cred	ditor	Not as of Dill (Disses)	
Political Media Inc.			Nature of Debt (Purpose): Email Marketing	
Mailing Address 1800 Diagonal Road Suite 600				
City	State	Zip Code		
Alexandria	VA	22314		
Outstanding Balance Beginning This Period	 		Transaction ID : D-8694	
1000.00				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	1000.00	
SUBTOTALS This Period This Page (optional	l))	6547.44	
TOTALS This Period (last page this line num	ber only) ·····)		
TOTAL OUTSTANDING LOANS from Sched	ule C (last p	age only)		
ADD 2) and 3) and carry forward to appropr	riate line of S	Summary Page (last page only)		

PAGE

FOR LINE NUMBER:

(check only one)

(Use separate schedule(s)

for each

numbered line)

10 OF

11

9

X 10

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

Exc

	BTS AND OBLIGATIONS cluding Loans	for each	(check only one)	. 9 x 10				
	ME OF COMMITTEE (In Full)				l			
	Paul Chabot Congres	S						
	A. Full Name (Last, First, Middle Initial) of De Capital Campaigns Inc.	ebtor or Cre	ditor		Nature of Debt (Purpose): Fundraising Consulting and Expenses			
	Mailing Address 38 Executive Park Suite 390							
Ì	City	State	Zip Code					
	Irvine	CA	92614-4730					
	Outstanding Balance Beginning This Period 2362.44	Transacti	Transaction ID : D-6668					
	Amount Incurred This Period	Outstandi	ng Balance at Close o	f This Pariod				
			Payment This Period		 			
	0.00		0.0	00	2	362.44		
İ	B. Full Name (Last, First, Middle Initial) of Del	otor or Cred	litor	Nature of D	ebt (Purpose):			
	Capital Campaigns Inc.			Fundraisin	Fundraising Consulting			
	Mailing Address 38 Executive Park Suite 390	1						
	City Irvine	State CA	Zip Code 92614-4730					
		I CA	32014 4730					
	Outstanding Balance Beginning This Period			Transacti	Transaction ID : D-6669			
	1250.00							
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close o	f This Period		
	0.00		0.0	00	, 1	250.00		
	C. Full Name (Last, First, Middle Initial) of De	ebtor or Cre	ditor	Nature of D	Nature of Debt (Purpose):			
	Mailing Address							
	City	State	Zip Code					
	Outstanding Balance Beginning This Period							
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close o	f This Period		
	Amount incurred this renou		r ayment mis r enou	Outstand	ng balance at close o	i illis i ellou		
			9 9 9		7	-		
1)	SUBTOTALS This Period This Page (optional) ·····		>	3	612.44		
2)	TOTALS This Period (last page this line num	ber only) ····		··· • [10	159.88		
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	page only)	···· >	65	700.00		
4)	ADD 2) and 3) and carry forward to appropr	nly) ▶	75	859.88				

PAGE

FOR LINE NUMBER:

(Use separate schedule(s)

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