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REPORT OF RECEIPTS **AND DISBURSEMENTS**

PONIVI 3	For An Auth	norized Com	mittee		Office Use Only
NAME OF TOMMITTEE (in full)	YPE OR PRINT		ample: If typing, the the lines.	type 12FE4M5	
John Cullum for Congre	SS				ı
ADDRESS (number and street)	P.O. Box 192				
V					
Check if different than previously reported. (ACC)	Atwood			CA	92811
2. FEC IDENTIFICATION NUI	MRFR ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00516443	-	3. IS THIS REPORT	NEW (N)	OR AMENI	STATE ▼ DISTRICT CA 46
4. TYPE OF REPORT (Choo	ose One) (b) 12-Day DDE	-Election Report 1	for the	
(a) Quarterly Reports:) 12-Day FRE		ior trie.	
April 15 Quarterly Re	port (Q1)	Ш	Primary (12P)	General (12G) Runoff (12R)
			Convention (120	Special (1	2S)
July 15 Quarterly Re	port (Q2)		M M / I	D D / Y Y Y Y	in the
October 15 Quarterly	Report (Q3)	Election on			State of
January 31 Year-End	Report (YE) (c	30-Day POS	T -Election Report	for the:	
					OD)
			General (30G)	Runoff (30	OR) Special (30S)
Termination Report (1	TER)	Election on	M M / I	D D / Y Y Y Y	in the State of
5. Covering Period 04	/ D D / Y	^Y 2017 Y	through	M M / D D /	Y Y Y Y Y 2017
I certify that I have examined this Type or Print Name of Treasurer	Report and to the Cullum, John, , ,	e best of my kr	nowledge and beli	ief it is true, correct and	d complete.
Cullum Signature of Treasurer	n, John, , ,		[Electronically File	d] Date	/ D D / Y Y Y Y Y Y 2017
NOTE: Submission of false, erroneo	us, or incomplete in	nformation may	subject the person	signing this Report to the	ne 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
John Cullum for Congress

COLUMN A	COLUMN B Election Cycle-to-Date
This Period	
6. Net Contributions (other than loans)	
(a) Total Contributions (other than loans) (from Line 11(e))	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00
7. Net Operating Expenditures	
(a) Total Operating Expenditures (from Line 17)	0.00
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	
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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name John Cullum for Congress 2017 06 30 2017 Report Covering the Period: From: To:

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	0.00	
	(ii) Unitemized	0.00	0.00	
	(iii) TOTAL of contributions from individuals	0.00	0.00	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
	(d) The Candidate	0.00	0.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00	
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
13.	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	
4.	OFFSETS TO OPERATING			
EXPENDITURES (Refunds, Rebates, etc.)		0.00	0.00	
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00	
6. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)		0.00	0.00	

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	0.00	0.00	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	
19	LOAN REPAYMENTS:			
10.	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00	
	(b) Of All Other Loans	0.00	0.00	
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00	
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	0.00	0.00	
	(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)	0.00	0.00	
	III. CASH SU	JMMARY		
23.	. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		0.00	
24	TOTAL RECEIPTS THIS PERIOD (from Line	0.00		
25. SUBTOTAL (add Line 23 and Line 24)			0.00	
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	0.00		
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)			0.00	

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

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

PAGE 5 OF FOR LINE NUMBER: **X** 13a (check only one)

5

13b Transaction ID: SC/10.4136 NAME OF COMMITTEE (In Full) John Cullum for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Cullum, John, , , General Mailing Address P.O. Box 192 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate CA 92811 Atwood Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 2250.00 1250.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D09D M 03M Ž01Ž Y06/30/2012 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)..... 1000.00 TOTALS This Period (last page in this line only) 1000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.