

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER

2015 JUN 29 AM 9:31

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. **12FE4M5**

LARRIBA, CON, HILLIARY, PAC
STAND WITH HILLIARY, PAC

ADDRESS (number and street) **5021 VERDUGO WAY**
SUITE 105-262
CAMARILLO CA 93063

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER ▼** **CITY ▲** **STATE ▲** **ZIP CODE ▲**

000570069

3. IS THIS REPORT **X** 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)

X 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

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

General (30G)	Runoff (30R)	Special (30S)
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Election on **MM / DD / YYYY** in the State of

5. Covering Period **01'01'2015** through **06'19'2015**

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 **Christine M. Chavez**

Signature of Treasurer **Christine M. Chavez** Date **06'18'2015**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only							
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FEC FORM 3X
Rev. 12/2004