

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
CalPortland Company Political Action Committee (CPCC-PAC)

ADDRESS (number and street)   
  
 Check if different than previously reported. (ACC)

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

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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Ms Irma Cabrera

Signature of Treasurer Ms Irma Cabrera [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**CalPortland Company Political Action Committee (CPCC-PAC)**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="37386.19"/>	<input type="text" value="37386.19"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="51382.63"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1550.00"/>	<input type="text" value="50054.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="52932.63"/>	<input type="text" value="87440.19"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4741.21"/>	<input type="text" value="39248.77"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="48191.42"/>	<input type="text" value="48191.42"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="5111.00"/>	

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**CalPortland Company Political Action Committee (CPCC-PAC)**

Report Covering the Period: From:  /  /  To:  /  /

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).....	1550.00	49044.00
(ii) Unitemized .....	0.00	1010.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1550.00	50054.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1550.00	50054.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1550.00	50054.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1550.00	50054.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4500.00	38500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	241.21	748.77
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4741.21	39248.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4741.21	39248.77

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1550.00	50054.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1550.00	50054.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**CalPortland Company Political Action Committee (CPCC-PAC)**

**A. David R. Carichner**  
Full Name (Last, First, Middle Initial)

Mailing Address 13879 N. Bentwater Dr.

City Oro Valley	State AZ	Zip Code 85755
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer California Portland Cement	Occupation Chief Mechanical Engineer
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **915.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.7006**

Amount of Each Receipt this Period  

250.00
--------

**B. Ronald E. Dumond**  
Full Name (Last, First, Middle Initial)

Mailing Address 785 Tucker Road

City Tehachapi	State CA	Zip Code 93561
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer California Portland Cement	Occupation Maintenance Superintendent
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2015

**Transaction ID : SA11AI.7003**

Amount of Each Receipt this Period  

600.00
--------

**C. William Larson**  
Full Name (Last, First, Middle Initial)

Mailing Address 9311 Oak Creek Rd

City Cherry Valley	State CA	Zip Code 92223
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CalPortland	Occupation VP
---------------------------------	------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2015

**Transaction ID : SA11AI.7004**

Amount of Each Receipt this Period  

250.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CalPortland Company Political Action Committee (CPCC-PAC)**

**A. Kenneth Nieman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7107 April Wind Ave  
 City Las Vegas State NV Zip Code 89131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CalPortland Company Occupation Sales Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 05 / 2015  
**Transaction ID : SA11AI.6999**  
 Amount of Each Receipt this Period 100.00

**B. Kenneth Nieman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7107 April Wind Ave  
 City Las Vegas State NV Zip Code 89131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CalPortland Company Occupation Sales Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2015  
**Transaction ID : SA11AI.7002**  
 Amount of Each Receipt this Period 100.00

**C. Dusting Pham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14008 Ballentine Place  
 City Baldwin Park State CA Zip Code 91706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CalPortland Company Occupation Enginneer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 10 / 01 / 2015  
**Transaction ID : SA11AI.7005**  
 Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 325.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CalPortland Company Political Action Committee (CPCC-PAC)**

**A. Dusting Pham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14008 Ballentine Place  
 City State Zip Code  
 Baldwin Park CA 91706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CalPortland Company Engineer  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2015  
**Transaction ID : SA11AI.7001**  
 Amount of Each Receipt this Period  
 125.00

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1550.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CalPortland Company Political Action Committee (CPCC-PAC)**

Full Name (Last, First, Middle Initial)

**A. BILL SHUSTER FOR CONGRESS**

Mailing Address 104 Hume Ave

City Alexandria State VA Zip Code 22301

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: PA District: 09

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 07 / 2015

**Transaction ID : SB23.7011**

Amount of Each Disbursement this Period

2500.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Cresent CRESENT HARDY FOR CONGRESS**

Mailing Address PO BOX 753941

City LAS VEGAS State NV Zip Code 89136

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NV District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 20 / 2015

**Transaction ID : SB23.7012**

Amount of Each Disbursement this Period

2000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4500.00

4500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**CalPortland Company Political Action Committee (CPCC-PAC)**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo Bank**

Mailing Address 333 S. Grand Avenue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.7007**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Wells Fargo Bank**

Mailing Address 333 S. Grand Avenue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.7008**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Wells Fargo Bank**

Mailing Address 333 S. Grand Avenue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.7009**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

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

**LOANS**

NAME OF COMMITTEE (In Full) <b>CalPortland Company Political Action Committee (CPCC-PAC)</b>	<b>Transaction ID : SC/10.6733</b>
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<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Douglas D. Anderson	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 10032 E Winter Sun Drive	
City Scottsdale State AZ ZIP Code 85262	

Original Amount of Loan 2600.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2600.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred MM / DD / YYYY 03 / 23 / 2014	Date Due MM / DD / YYYY	Interest Rate % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 2600.00
<b>TOTALS</b> This Period (last page in this line only).....▶	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

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

**LOANS**

NAME OF COMMITTEE (In Full) **CalPortland Company Political Action Committee (CPCC-PAC)** Transaction ID : **SC/10.6735**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Jay M Grady	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2413 Moss Circle	
City LaVerne State CA ZIP Code 91750	

Original Amount of Loan 2501.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2501.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: MM / DD / YYYY (03 / 03 / 2014)      Date Due: MM / DD / YYYY      Interest Rate: \_\_\_\_\_ % (apr)      Secured:  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: _____

<b>SUBTOTALS</b> This Period This Page (optional).....▶	2501.00
<b>TOTALS</b> This Period (last page in this line only).....▶	_____
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

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

**LOANS**

NAME OF COMMITTEE (In Full) **CalPortland Company Political Action Committee (CPCC-PAC)** Transaction ID : **SC/10.6734**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Mrs. Jamie A. Padilla	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 90 Scorpios Island	
City Henderson State NV ZIP Code 89012	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10.00	0.00	10.00

**TERMS**

Date Incurred: MM / DD / YYYY (03 / 26 / 2014)      Date Due: MM / DD / YYYY      Interest Rate: \_\_\_\_\_ % (apr)      Secured:  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: _____

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	10.00
<b>TOTALS</b> This Period (last page in this line only)..... ▶	5111.00

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