

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

Paul Chabot Congress 2014

ADDRESS (number and street) 12223 Highland Avenue

# 106-228

Check if different than previously reported. (ACC)

Rancho Cucamonga

CA

91739-2574

2. **FEC IDENTIFICATION NUMBER**

C C00557884

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

CA

31

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)
- Termination Report (TER)

(b) 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

(c) 30-Day **POST**-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY 01 / 01 / 2014

through

MM / DD / YYYY 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 Kelly Lawler

Signature of Treasurer Kelly Lawler

[Electronically Filed]

Date

MM / DD / YYYY 07 / 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								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Paul Chabot Congress 2014**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	42962.13	42962.13
(b) Total Contribution Refunds (from Line 20(d)) .....	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	42962.13	42962.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	16313.87	16313.87
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	16313.87	16313.87
8. Cash on Hand at Close of Reporting Period (from Line 27).....	88648.26	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	64368.37	

**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 12/2003)

Write or Type Committee Name

**Paul Chabot Congress 2014**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	17600	17600
(ii) Unitemized.....	5519.25	5519.25
(iii) TOTAL of contributions from individuals ▶	23119.25	23119.25
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	7000	7000
(d) The Candidate.....	12842.88	12842.88
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	42962.13	42962.13
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	62000	62000
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	62000	62000
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	0
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0	0
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	104962.13	104962.13

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16313.87	16313.87
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS .....	0	0
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	16313.87	16313.87

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	104962.13
25. SUBTOTAL (add Line 23 and Line 24).....	104962.13
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16313.87
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	88648.26

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

Ammendment is to move candidate loan of personal funds to line 13a and to include note that it was from personal funds. Ammendment also includes memo entries for vendors over \$200 for expenses paid via non monetary contribution by the candidate.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Paul E Cook**

Mailing Address 35375 Wildwood Canyon Road

City Yucaipa State CA Zip Code 92399-5124

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

Name of Employer San Bernardino County Sheriff Dept Occupation Deputy Chief

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 11 / 2014**

**Transaction ID : A-CF647**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Anthony C Balestrieri**

Mailing Address 440 L Street

City Washington State DC Zip Code 20001

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

Name of Employer MetLife Occupation Finance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 06 / 2014**

**Transaction ID : A-CF623**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Clemente A Mojica**

Mailing Address 320 W G Street Suite 103

City Ontario State CA Zip Code 91762

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

Name of Employer NPHS Occupation Housing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 08 / 2014**

**Transaction ID : A-CF634**

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional).....

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

**3250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph P DePaola**

Mailing Address PO Box 655

City Pawling State NY Zip Code 12564-0655

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

Name of Employer DePaola Valdes, LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : A-CF663**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Kevin Mulligan**

Mailing Address 4100 Jurupa Street

City Ontario State CA Zip Code 91761

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

Name of Employer On-Point Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014

**Transaction ID : A-CF613**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Brett Snow**

Mailing Address 18930 Pimlico Rd

City Apple Valley State CA Zip Code 92308

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

Name of Employer MCLB Barstow Fire & Emergency Services Occupation Firefighter/Lieutenant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2014

**Transaction ID : A-CF689**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Barry Rhoads**

Mailing Address 6793 Father John Ct

City Mclean State VA Zip Code 22101

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

Name of Employer Cassidy & Associates Occupation Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 16 / 2014**

**Transaction ID : A-CF665**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Jonathan A Holland**

Mailing Address 6425 Greenview Court

City Suwanee State GA Zip Code 30024-3483

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

Name of Employer U.S. Dept. of State Occupation Foreign Service Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

**Transaction ID : A-CF611**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Betty S Sembler**

Mailing Address 180 Beach Drive NE

City St Petersburg State FL Zip Code 33701-3909

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : A-CF630**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional).....

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

**3850.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Martin Collen M.D.**

Mailing Address 6647 Hawarden Dr

City Riverside State CA Zip Code 92506

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A-CF704**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Desi E Rosado**

Mailing Address P.O. Box 3109

City Houston State TX Zip Code 77253

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

Name of Employer Qualcomm Occupation Senior Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2014**

**Transaction ID : A-CF679**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mark S Sterner**

Mailing Address 4563 Devonshire Drive

City Center Valley State PA Zip Code 18034-9673

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

Name of Employer Self- Mark Sterner Occupation Education

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A-CF703**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Dale R Broome M.D.**

Mailing Address 503 E. Mariposa Dr.

City State Zip Code  
Redlands CA 92373

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

Name of Employer Occupation  
Beaver Medical Group Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 08 / 2014**

**Transaction ID : A-CF632**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Medina Jr.**

Mailing Address 3652 Ferndale Avenue

City State Zip Code  
San Bernardino CA 92404-1928

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

Name of Employer Occupation  
Daniel Medina-Self Employed Cinematographer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 16 / 2014**

**Transaction ID : A-IF667**

Amount of Each Receipt this Period  
**2000**

Inkind: Filming and Editing of Campaign Video

**C.** Full Name (Last, First, Middle Initial)  
**Andrew J Chabot**

Mailing Address 14116 Rideout Court

City State Zip Code  
Fontana CA 92336-3616

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

Name of Employer Occupation  
Self Employed CFP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A-CF698**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

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

**2750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Buydos**

Mailing Address 3273 1st Avenue

City San Diego State CA Zip Code 92103

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

Name of Employer **PARSONS** Occupation Curriculum manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF615**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Jose A Castro**

Mailing Address 27708 Rockwood Ave

City Moreno Valley State CA Zip Code 92555

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

Name of Employer **CollectPlus** Occupation Data Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 20 / 2014**

**Transaction ID : A-CF672**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**David L Mayo**

Mailing Address 10808 Foothill Boulevard Suite 160

City Rancho Cucamonga State CA Zip Code 91730-0601

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

Name of Employer **Self Employed** Occupation Insurance Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : A-CF681**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Scott Chipman**

Mailing Address 9855 Black Mountain Rd

City san diego State CA Zip Code 92126

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

Name of Employer Design Synthesis Occupation Designer/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : A-CF685**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Peter M Varney**

Mailing Address 1520 East Worthington Avenue

City Charlotte State NC Zip Code 28203

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

Name of Employer Lowe's Companies, Inc. Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2014**

**Transaction ID : A-CF691**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Perry S Cubeta**

Mailing Address 9531 Heathwood Court

City Burke State VA Zip Code 22015-1528

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

Name of Employer Noble Corporation Occupation Merchant Marine Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : A-CF612**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Gregory R Grabowski**

Mailing Address 35 Gingham Street

City State Zip Code  
Trabuco Canyon CA 92679-5320

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

Name of Employer Occupation  
Ahtna Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 30 / 2014**

**Transaction ID : A-CF695**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Lidia Walsh**

Mailing Address 8111 Finch Street

City State Zip Code  
Corona CA 92880-0908

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

Name of Employer Occupation  
n/a Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A-CF720**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Steve Carroll**

Mailing Address 39373 Prospect Drive

City State Zip Code  
Forest Falls CA 92339-9699

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

Name of Employer Occupation  
Creios Design Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 16 / 2014**

**Transaction ID : A-IF670**

Amount of Each Receipt this Period  
**500**

Inkind: Video Recording and Editing

**SUBTOTAL** of Receipts This Page (optional).....

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Robert M Green**

Mailing Address 1144 Avendia Lomita

City San Dimas State CA Zip Code 91773

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

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A-CF739**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**David L Mayo**

Mailing Address 10808 Foothill Boulevard Suite 160

City Rancho Cucamonga State CA Zip Code 91730-0601

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

Name of Employer Self Employed Occupation Insurance Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : A-CF678**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Adam Hasner**

Mailing Address 17100 Boca Club Boulevard Apt. 5

City Boca Raton State FL Zip Code 33487-1256

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 06 / 2014**

**Transaction ID : A-CF622**

Amount of Each Receipt this Period  
**150**

**SUBTOTAL** of Receipts This Page (optional).....

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

**650.00**

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

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

FOR LINE NUMBER: PAGE 15 OF 27  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Jennifer A Wickre**

Mailing Address 1417 A Street, NE

City Washington State DC Zip Code 20002

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

Name of Employer UC, San Francisco Occupation Assc Dtr of Govt Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : A-CF666**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Kevin Mulligan**

Mailing Address 4100 Jurupa Street

City Ontario State CA Zip Code 91761

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

Name of Employer On-Point Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A-CF711**

Amount of Each Receipt this Period  
**1000**

**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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

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

**1250.00**

**17600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Future Leaders PAC**

Mailing Address **PO Box 30844**

City **Bethesda** State **MD** Zip Code **20824-0844**

FEC ID number of contributing federal political committee. **C C00269407**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 11 / 2014**

**Transaction ID : A-CF662**

Amount of Each Receipt this Period  
**5000**

**B.** Full Name (Last, First, Middle Initial)  
**Jerry Lewis Political Action Committee**

Mailing Address **PO Box 247**

City **Redlands** State **CA** Zip Code **92373-0081**

FEC ID number of contributing federal political committee. **C C00090357**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 11 / 2014**

**Transaction ID : A-CF642**

Amount of Each Receipt this Period  
**2000**

**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) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 \_\_\_\_\_

Amount of Each Receipt this Period  
 \_\_\_\_\_

**SUBTOTAL** of Receipts This Page (optional).....

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

**7000.00**

**7000.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Paul R Chabot**

Mailing Address 12223 Highland Avenue  
# 106-228

City Rch Cucamonga State CA Zip Code 91739-2574

FEC ID number of contributing federal political committee. **C H4CA31071**

Name of Employer US Navy Reserves Occupation Lt. Commander/Intelligence Officer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**74842.88**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : A-IF659**

Amount of Each Receipt this Period  
**256.88**

Inkind: Printing, vendors under \$200

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Paul R Chabot**

Mailing Address 12223 Highland Avenue  
# 106-228

City Rch Cucamonga State CA Zip Code 91739-2574

FEC ID number of contributing federal political committee. **C H4CA31071**

Name of Employer US Navy Reserves Occupation Lt. Commander/Intelligence Officer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**74842.88**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 18 / 2014**

**Transaction ID : A-IF654**

Amount of Each Receipt this Period  
**1740**

Inkind: Filing Fee

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Paul R Chabot**

Mailing Address 12223 Highland Avenue  
# 106-228

City Rch Cucamonga State CA Zip Code 91739-2574

FEC ID number of contributing federal political committee. **C H4CA31071**

Name of Employer US Navy Reserves Occupation Lt. Commander/Intelligence Officer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**74842.88**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 05 / 2014**

**Transaction ID : A-IF658**

Amount of Each Receipt this Period  
**10846**

Inkind: Candidate Statement Fees

**SUBTOTAL** of Receipts This Page (optional).....

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

**12842.88**

**12842.88**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 27
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Paul R Chabot**

Mailing Address 12223 Highland Avenue  
# 106-228

City Rch Cucamonga State CA Zip Code 91739-2574

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

Name of Employer US Navy Reserves Occupation Lt. Commander/Intelligence Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**74842.88**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 06 / 2014**

**Transaction ID : A-LL3**

Amount of Each Receipt this Period  
**62000**

Personal Loan

**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)

Election Cycle-to-Date

Date of Receipt  
 M M M / D 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)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

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

**62000.00**

**62000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 27			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. Secretary of State</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1500 11th Street Room 495		Amount of Each Disbursement this Period 1740
City Sacramento	State CA	
Zip Code 95814-5701	Purpose of Disbursement Filing Fee	<b>Transaction ID : B-S-158</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Paul Chabot(02/18/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Complete Campaigns</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 50.5
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Credit Card Processing Fees	<b>Transaction ID : B-E-687</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Complete Campaigns</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 185
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Credit Card Processing Fees	<b>Transaction ID : B-E-669</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	235.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A. Complete Campaigns**

Full Name (Last, First, Middle Initial)  
Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
03 / 16 / 2014

Amount of Each Disbursement this Period  
5

Transaction ID : B-E-668

Category/Type  
001

**B. Steve Carroll**

Full Name (Last, First, Middle Initial)  
Mailing Address 39373 Prospect Drive

City Forest Falls State CA Zip Code 92339-9699

Purpose of Disbursement  
Inkind: Video Recording and Editing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
03 / 16 / 2014

Amount of Each Disbursement this Period  
500

Transaction ID : B-I-670

Category/Type

**c. Complete Campaigns**

Full Name (Last, First, Middle Initial)  
Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
03 / 07 / 2014

Amount of Each Disbursement this Period  
30

Transaction ID : B-E-631

Category/Type  
001

**SUBTOTAL** of Disbursements This Page (optional)..... 535.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A. Complete Campaigns**

Full Name (Last, First, Middle Initial)  
Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
03 / 17 / 2014

Amount of Each Disbursement this Period  
25

Transaction ID : B-E-673

Category/Type: 001

**B. County of San Bernardino Registrar of Voters**

Full Name (Last, First, Middle Initial)  
Mailing Address 777 E Rialto Avenue

City San Bernardino State CA Zip Code 92415-1005

Purpose of Disbursement  
Ballot Statement Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
03 / 05 / 2014

Amount of Each Disbursement this Period  
10846

Transaction ID : B-S-159

[MEMO ITEM]  
Subitemization of Paul Chabot(03/05/14)

Category/Type: 001

**c. Complete Campaigns**

Full Name (Last, First, Middle Initial)  
Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
03 / 28 / 2014

Amount of Each Disbursement this Period  
32.5

Transaction ID : B-E-757

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 57.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

Full Name (Last, First, Middle Initial) <b>A. Tri Counties Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 210 N Tehama Street		Amount of Each Disbursement this Period 217.74 <b>Transaction ID : B-E-759</b>
City Willows	State CA Zip Code 95988-2834	
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Daniel Medina Jr.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2014
Mailing Address 3652 Ferndale Avenue		Amount of Each Disbursement this Period 2000 <b>Transaction ID : B-I-667</b>
City San Bernardino	State CA Zip Code 92404-1928	
Purpose of Disbursement Inkind: Filming and Editing of Campaign Video	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dr. Paul R Chabot</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 12223 Highland Avenue # 106-228		Amount of Each Disbursement this Period 1740 <b>Transaction ID : B-I-654</b>
City Rch Cucamonga	State CA Zip Code 91739-2574	
Purpose of Disbursement Inkind: Filing Fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3957.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 27			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

**A. Complete Campaigns**

Full Name (Last, First, Middle Initial)  
Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
03 / 31 / 2014

Amount of Each Disbursement this Period  
70.25

Transaction ID : B-E-707

Category/Type  
001

**B. Dr. Paul R Chabot**

Full Name (Last, First, Middle Initial)  
Mailing Address 12223 Highland Avenue # 106-228

City Rch Cucamonga State CA Zip Code 91739-2574

Purpose of Disbursement  
Inkind: Printing, vendors under \$200

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
02 / 24 / 2014

Amount of Each Disbursement this Period  
256.88

Transaction ID : B-I-659

Category/Type

**c. Dr. Paul R Chabot**

Full Name (Last, First, Middle Initial)  
Mailing Address 12223 Highland Avenue # 106-228

City Rch Cucamonga State CA Zip Code 91739-2574

Purpose of Disbursement  
Inkind: Candidate Statement Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
03 / 05 / 2014

Amount of Each Disbursement this Period  
10846

Transaction ID : B-I-658

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 11173.13

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

Full Name (Last, First, Middle Initial)  
**A. Complete Campaigns**

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 17 / 2014

Amount of Each Disbursement this Period: 5

Transaction ID : B-E-758

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**B. Complete Campaigns**

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement Administrative/Salary/Overhead: Software

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 11 / 2014

Amount of Each Disbursement this Period: 350

Transaction ID : B-E-636

Category/Type: 001

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 355.00

**TOTAL** This Period (last page this line number only)..... 16313.87



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

NAME OF COMMITTEE (In Full) **Paul Chabot Congress 2014** Transaction ID : **SC/10-L3**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Dr. Paul R Chabot</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 12223 Highland Avenue # 106-228		
City Rch Cucamonga	State CA	ZIP Code 91739-2574

Original Amount of Loan 62000	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period 62000
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<b>TERMS</b>	Date Incurred M 03 / D 06 / Y 2014	Date Due M / D / Y 12/31/2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....	▶	62000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	62000.00

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

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Paul Chabot Congress 2014**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cardmember Service</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Credit Card Payment: See Memos
Mailing Address PO Box 94014	
City State Zip Code Palatine IL 60094-4014	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	<b>Transaction ID : SD10-DEBT717</b>	
Amount Incurred This Period <input type="text" value="836.17"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="836.17"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Adam Sands</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Public Relations Consulting
Mailing Address 29359 Henderson Lane # 106-228	
City State Zip Code Highland CA 92346-6209	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	<b>Transaction ID : SD10-DEBT715</b>	
Amount Incurred This Period <input type="text" value="1000"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="1000"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Daniel Medina Jr.</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Videography Services
Mailing Address 3652 Ferndale Avenue	
City State Zip Code San Bernardino CA 92404-1928	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	<b>Transaction ID : SD10-DEBT714</b>	
Amount Incurred This Period <input type="text" value="350"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="350"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="2186.17"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

NAME OF COMMITTEE (In Full)  
**Paul Chabot Congress 2014**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Adam Sands</b>		Nature of Debt (Purpose): Travel: Mileage for District Travel
Mailing Address 29359 Henderson Lane # 106-228		
City Highland	State CA	Zip Code 92346-6209

Outstanding Balance Beginning This Period <input type="text" value="0"/>	<b>Transaction ID : SD10-DEBT716</b>	
Amount Incurred This Period <input type="text" value="182.2"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="182.2"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="182.20"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="2368.37"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="62000.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="64368.37"/>