PAGE 1 / 9

Image# 201607149020460829

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than An Aut	nonzea committee			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	g, type	L2FE4M5	
Mimi Walters Victory Fu	und				
ADDRESS (number and street)	9070 Irvine Center Drive, #1	50			
Check if different					
than previously reported. (ACC)	Irvine			CA	92618
2. FEC IDENTIFICATION NU	MBER ▼ CIT	TY ▲	S	TATE 🛦	ZIP CODE 🛦
C C00564674		S THIS X NE	ew) OR	AME (A)	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:		ay 20 (M5)	H	0 (M8) Nov 20 (M11) (Non-Election Year Only) 0 (M9) Dec 20 (M12)
(a) Quarterly Reports:		00 (M4)	1.00 (1.47)	H	(Non-Election Year Only)
April 15 Quarterly Report (Q		20 (M4) Ju	I 20 (M7)	Oct 20	Jan 31 (YE)
July 15 Quarterly Report (Q2	(C) 12-Day	Primary (12P)	Ш	General (1	2G) Runoff (12R)
October 15	Report for the:	Convention (12	2C)	Special (12	2S)
Quarterly Report (Q3 January 31 Year-End Report (YE	Floatio	on on	D		in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)		Runoff (30	R) Special (30S)
Termination Report (TER)	Election	on on	D D / Y	- Y - Y - Y	in the State of
5. Covering Period 05	19 / 2016	through	06	30	2016
I certify that I have examined this	s Report and to the best of	my knowledge and be	elief it is true	, correct and	complete.
Type or Print Name of Treasurer Jen Slater					
Signature of Treasurer Jen Ste	uter	[Electronically I	Filed] Da	te 07	06 / 2016
NOTE: Submission of false, errone	ous, or incomplete informatio	n may subject the perso	on signing this	Report to the	penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Mimi Walters Victory Fund 05 19 2016 06 30 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 1559.15 January 1, 2016 (b) Cash on Hand at 6079.15 Beginning of Reporting Period..... 2700.00 191868.93 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 193428.08 8779.15 6(a) and 6(c) for Column B)..... 501.26 185150.19 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 8277.89 8277.89 (subtract Line 7 from Line 6(d))..... 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 0.00 Schedule C and/or Schedule D) 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

Mimi	Walters	Victory	/ Fund
	VVGILOIO	V IOLOI)	, , ана

Report Covering the Period: From: 05 / 19 / 2016 To: 06 / 30 / 2016				
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
` '				
	2700.00	405440.00		
(i) Itemized (use Schedule A)	2700.00	185118.93		
(ii) Haitanaina d	0.00	2250.00		
	0.00	2230.00		
	2700.00	187368.93		
Lines Tr(a)(i) and (ii)	7 27 00.00	7 7		
(b) Political Party Committees	0.00	0.00		
` '	0.00	4500.00		
Totals to Line 33, page 5)▶	2700.00	191868.93		
Transfers From Affiliated/Other				
Party Committees	0.00	0.00		
=				
All Loans Received	0.00	0.00		
Loan Repayments Received	0.00	0.00		
Offsets To Operating Expenditures				
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
Refunds of Contributions Made	, , , , , , , , , , , , , , , , , , , ,			
to Federal Candidates and Other				
	0.00	0.00		
·				
` '	0.00	0.00		
	0.00	2.22		
(Irom Schedule H3)	0.00	0.00		
	200	222		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
,,,_,,,				
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	Operating Expenditures:	Total This Period	Calendar Year-to-Date
	(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	1.26	27534.30
((c) Total Operating Expenditures	1.26	27534.30
2	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	1.20	21004.00
(Committees	0.00	0.00
F	Contributions to Federal Candidates/Committees		0.00
	and Other Political Committeesndependent Expenditures	0.00	0.00
((use Schedule E)	0.00	0.00
25. (Coordinated Party Expenditures (2 U.S.C. §441a(d))	0.00	
(use Schedule F)	0.00	0.00
6. I	_oan Repayments Made	500.00	500.00
•			
	oans MadeRefunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	man ronnear committees	7	
((b) Political Party Committees	0.00	0.00
((c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	
(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
9. (Other Disbursements	0.00	157115.89
		7	7
	Federal Election Activity (2 U.S.C. §431(20))		
((a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
		222	2.00
	(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
1 .	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	501.26	185150.19
		001.20	1.33.36110
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	501.26	185150.19

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	2700.00	191868.93
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2700.00	191868.93
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1.26	27534.30
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	1.26	27534.30

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one)

	EMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Statemer for commercial purposes, other than using the name		rson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Mimi Walters Victory Fund		
۹.	Full Name (Last, First, Middle Initial) Lee Samson Mailing Address 9200 W Sunset, 7th Floor		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta West Hollywood CA	•	Transaction ID : INCA418 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		2700.00 Memo Item
	SNF Management Owner	pation er egate Year-to-Date ▼ 2700.00	
3.	Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt
	City Sta	te Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Occur	pation	Memo Item
	Receipt For: Primary General Other (specify) ▼ Aggre	egate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address City Sta	te Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		
		pation	Memo Item
	Receipt For: Primary General Other (specify) ▼	egate Year-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional)		2700.00
т	OTAL This Period (last page this line number only)	>	2700.00

SCHEDULE B (FEC Form 3X)

SCHEDULE B (FEC FOIII 3X)	Llee concrete cohedule(s)	FOR LINE I		
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only 21b	one) 22 23 24 25 26	
	Detailed Summary Page	27	28a 28b 28c 29 30b	
Any information copied from such Reports and Statem	ents may not be sold or used	d by any perso	on for the purpose of soliciting contributions	
or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)				
Mimi Walters Victory Fund				
Full Name (Last, First, Middle Initial)				
Wendy Warfield & Associates		Date of Disbursement		
Mailing Address 921 11th Street, Suite 701			06 01 2016	
Maning Address 921 Titli Street, Suite 701			00 01 2010	
	tate Zip Code		Transaction ID : EXPB423	
	CA 95814		Transaction is . Ext 5420	
Purpose of Disbursement Office Supplies		001	Amount of Each Disbursement this Period	
Candidate Name				
		Category/ Type	1.26	
Office Sought: House Disbursem			Memo Item	
	Primary General		_	
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
3.			Date of Disbursement	
			M = M / D = D / Y = Y = Y	
Mailing Address				
City	state Zip Code			
Purpose of Disbursement				
Tarpess of Distriction			Amount of Each Disbursement this Period	
Candidate Name	"	Category/		
Office Sought: House Disbursem	nont For:	Туре		
	Primary General		Memo Item	
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Data of Dishura	
. .			Date of Disbursement	
Mailing Address			M M / D D / Y Y Y Y	
City	state Zip Code			
	· 			
Purpose of Disbursement Candidate Name Category/ Type				
			Amount of Each Disbursement this Period	
Office Sought: House Disbursem			Memo Item	
	Primary General		_	
State: District:	Other (specify) ▼			
Cidio.				
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period (last page this line number only)				

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	one) 22 23 24 25 X 26	
Any information copied from such Reports and Stater	nents may not be sold or used	d by any perso	on for the purpose of soliciting contributions	
or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) Mimi Walters Victory Fund	ne and address of any political	I committee to	solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) Nalters for Congress Mailing Address 9070 Irvine Center Drive, #150		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	State Zip Code			
Irvine Purpose of Disbursement Candidate Name	CA 92618	Catagony	Transaction ID : PAYB422 Amount of Each Disbursement this Period	
Walters for Congress Office Sought: House Senate President State: District:	ment For: Primary General Other (specify)	Category/ Type	Memo Item	
Full Name (Last, First, Middle Initial) 3. Mailing Address			Date of Disbursement	
City Surpose of Disbursement	State Zip Code		Account of Early Disharm would this Davied	
Candidate Name Office Sought: House Disburser Senate	ment For: Primary General	Category/ Type	Amount of Each Disbursement this Period Memo Item	
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial) C. Mailing Address			Date of Disbursement	
	State Zip Code			
Purpose of Disbursement			Amount of Each Disbursement this Period	
Candidate Name Categor Type			Amount of Each Disbursement this Penod	
Office Sought: House Senate President State: District:	ment For: Primary General Other (specify) ▼		Memo Item	
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period (last page this line number only)				

SCHEDULE C (FEC Form 3X)

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

PAGE 9 OF 9
FOR LINE 13 OF FORM 3X

	Detailed Summary Page		
IAME OF COMMITTEE (In Full) Mimi Walters Victory Fund	Transaction ID : PAYC3		
·			
LOAN SOURCE Full Name (Last, First, Middle Initial) Walters for Congress	Memo Item Election: Primary General		
Mailing Address 9070 Irvine Center Drive, #150	Other (specify)		
City Irvine State CA ZIP Cod	le 92618		
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period		
500.00	500.00		
TERMS Date Incurred Date Due	Interest Rate Secured:		
	None 0.00 % (apr) Yes No		
List All Endorsers or Guarantors (if any) to Loan Source			
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:		
SUBTOTALS This Period This Page (optional)			