FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

2017 APRILIDUS AMy 9: 35

NAME OF		
COMMITTEE	(in	full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FEARO MAIL CENTER

Matt Boutte for Cong	ress							1
			1 1 1 1	 	<u> </u>	- 		
ADDRESS (number and street) Check if different	- <u></u>	spq		S	TATE A	ST	U - 41. CODE ATE ▼ D	
M C 00511683 N	H	S THIS REPORT	NEW (N)	OR	AMENI (A)	1 .	'A	24
4. TYPE OF REPORT (Choose Control of the control of	(Q1) (Q2) port (Q3) port (YE) (c) 3	Election on O-Day POST	Election Report Primary (12P) Convention (1	2C) /	General (1	2S) in Sta	·	al (30S)
5. Covering Period 12 /	01 ' 201	1 1	through	MO3M	′ 31 ° ′	2012	Y	
I certify that I have examined this Rep		•	owledge and L	pelief it is tru	e, correct and	d complete.		
Signature of Treasurer Susan Preheim Date Date Date Diff Dif								
Office Use Only						FEC F(Revised		·

		FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	Page 2
		or Type Committee Name t Boutte for Congress		
R	eport	Covering the Period: From:	2 ' 01 ° ' ' 2011 To: "03" ' 31 °	′ <u> </u>
	Net	Contributions (other than loans)	COLUMN A COLUMN This Period Election Cycle-	
J	(a)	Total Contributions (other than loans) (from Line 11(e))	5 562. 00 5	562. 00
	(b)	Total Contribution Refunds (from Line 20(d))		
о	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5 562 00 5	562. 00
C	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	2 391. 14	391 14
	(b)	Total Offsets to Operating Expenditures (from Line 14)		7.4
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	2, 391, 14	391 14
•		h on Hand at Close of orting Period (from Line 27)	3 170 86	
	the	ots and Obligations Owed TO Committee (Itemize all on edule C and/or Schedule D)	0	
0.	the	ots and Obligations Owed BY Committee (Itemize all on edule C and/or Schedule D)	472. 12	

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

Page 3

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Matt Boutte for Congress

Report Covering the Period:

From:

2011

To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
30784895	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) (ii) Unitemized (iii) TOTAL of contributions from individuals	4,150, 00 1 412. 00 5,562. 00	4, 150, 00 1, 412, 00 5,562, 00
120	(b) Political Party Committees(c) Other Political Committees (such as PACs)		
	(d) The Candidate	5,56200	5,562. 00
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13.	LOANS: (a) Made or Guaranteed by the Candidate		
	(b) All Other Loans(c) TOTAL LOANS (add Lines 13(a) and (b))		
14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15.	OTHER RECEIPTS (Dividends, Interest, etc.)		
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	5,56200	5,562, 00

DETAILED SUMMARY PAGE

of Disbursements Page 4 FEC Form 3 (Revised 02/2003) **COLUMN A COLUMN B** II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 2,391.14 2.391.14 17. OPERATING EXPENDITURES...... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate..... Of All Other Loans TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other Than Political Committees (b) Political Party Committees..... (c) Other Political Committees (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 2,391. 2,391 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 00 5,562 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 5,562 00 25. SUBTOTAL (add Line 23 and Line 24)..... 2,391 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)......

3,170.

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

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SCHEDULE A	(FEC Form 3)
ITEMIZED RE	CEIPTS

NAME OF COMMITTEE (in Full)

Full Name (Last, First, Middle Initial)

Matt Boutte for Congress

PAGE OF FOR LINE NUMBER: (check only one) Use separate schedule(s) for each category of the 11a 11b 11c 11d **Detailed Summary Page** 12 13a 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.

Kevin McReynolds	J	Date of Receipt
Mailing Address 389 Broad St.		12 19 2011
City San Luis Obispo	State Zip Code CA 93405	CHETOGRAPHICAL CONTRACTOR CONTRAC
FEC ID number of contributing federal political committee.	C 00511683	Amount of Each Receipt this Period
Name of Employer Self	Occupation Attorney	200.00
Receipt For: X Primary General Other (specify)	Election Cycle-to-Date	
Full Name (Last, First, Middle Initial) Kathleen Smith		Date of Receipt
Mailing Address 625 Evans Rd.	State Zip Code	12 21 2011
City San Luis Obispo	CA 93401	
FEC ID number of contributing federal political committee.	C 00511683	Amount of Each Receipt this Period
Name of Employer None	Occupation Homemaker	5,00.00
Receipt For: X Primary General Other (specify)	Election Cycle-to-Date	
Full Name (Last, First, Middle Initial) Mark Anderson		Date of Receipt
Mailing Address 798 Palm St.	State Zip Code	01 2012
San Luis Obispo	CA 93401	
FEC ID number of contributing federal political bommittee.	C 00511683	Amount of Each Receipt this Period
Name of Employer Self	Occupation Commercial real estate	250.00
Receipt For: X Primary	Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional)		950.00
TOTAL This Period (last page this line number	only)	

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	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one) 11a	
		erson for the purpose of soliciting contributions eta solicit.contributions from such committee.			
	NAME OF COMMITTEE (In Full) Matt Boutte for Congres	s			
A.	Full Name (Last, First, Middle Initial) Patricia Cakebread Mailing Address 950 S. Gilbert City Anaheim	Date of Receipt OI 19 2012			
	FEC ID number of contributing federal political committee.	CA C 00	92804	Amount of Each Receipt this Period	
	Name of Employer N/A	Occupation Reti		250.00	
	Receipt For: X Primary General Other (specify)		ycle-to-Date 250.00		
В.	Full Name (Last, First, Middle Initial) Deanna Leece			Date of Receipt	
	Mailing Address 228 Mission Lane City San Luis Obispo	02 21 2012			
	FEC ID number of contributing federal political committee.	11 🚗 11	93405 511683	Amount of Each Receipt this Period	
	Name of Employer None	Occupation		250.00	
	Receipt For: X Primary General Other (specify)	Election C	ycle-to-Date		
С.	Full Name (Last, First, Middle Initial) Charlie Katherman	Date of Receipt			
O.	Mailing Address PO Box 1812 City Santa Maria	State CA	Zip Code	02 ' 21 ' 2012	
	FEC ID number of contributing federal political committee.	<u></u>	93456	Amount of Each Receipt this Period	
	Name of Employer Self	Occupation Geo.	logist	500.00	
	Receipt For: X Primary General Other (specify)	Election C	ycle-to-Date		

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

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

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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one) 11a		
	y information copied from such Reports and Statemer		ay not be sold or used by any p			
	NAME OF COMMIFFEE (In Full) Matt Boutte for Congress					
<u>Г</u>	Full Name (Last, First, Middle Initial) Mark Lindgren			Date of Receipt		
7.	Mailing Address 3565 Sequoia Dr.			02 28 2012		
	City Stat San Luis Obispo CF	A	Zip Code 93401	_		
	FEC ID number of contributing federal political committee.		511683	Amount of Each Receipt this Period		
	Name of Employer Occup Fedex P:	pation ilo				
		Election Cycle-to-Date				
В.	Full Name (Last, First, Middle Initial) William Saiki			Date of Receipt		
	Mailing Address 2281 Fresno St.	03 ' 06 ' 2012"				
	Los Osos Ci		Zip Code 93402			
	FEC ID number of contributing federal political committee.	00:	511683	Amount of Each Receipt this Period		
		•	r maintenance	200.00		
			ycle-to-Date 200.00			
C.	Full Name (Last, First, Middle Initial) Dale Texter			Date of Receipt		
Ο.	Mailing Address 5833 Salisbury Lane City Stat	ite	Zip Code	02 / 21 / 2012		
		CA	93401			
	FEC ID number of contributing federal political committee.	00	511683	Amount of Each Receipt this Period		
		pation et i	red	500.00		
	Receipt For: Election (ycle-to-Date			
	X Primary General Other (specify)		500.00			
8	UBTOTAL of Receipts This Page (optional)			950.00		

TOTAL This Perlod (last page this line number only).....

SCHEDULE A (FEC Form 3)			Use separate schedule(s)	FOR LINE (check only		PAGE	OF
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	11a	11b	11c	11d 15
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	ay not be sold or used by any paddress of any political committed	erson for the	purpose of	soliciting o	contributions	
	NAME OF COMMITTEE (In Full) Matt Boutte for Congress	3					
Α.	Full Name (Last, First, Middle Initial) Susan Pazdan			Date of	Receipt		
	Mailing Address 125 LePoint St. City	03	10	201	12		
	Arroyo Grande	State CA	Zip Code 93421			 	
o	FEC ID number of contributing federal political committee.	C 0.0	511683		of Each Rec		
0	Name of Employer 1 PB Commercial	Occupation Realt			л <u>г</u> х		
30784	Receipt For: X Primary General Other (specify)						
10 Bi	Full Name (Last, First, Middle Initial) Armand Boutte			Date of	Receipt		
러	Mailing Address 1178 Woodside Dr.	03 / 12 / 2012					
	City San Luis Obispo	State CA	Zip Code 93401		ha		
	FEC ID number of contributing federal political committee.	Coos	511683		t of Each Red	,	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Name of Employer County of Sn LuisObispo	Occupation Land	Surveyor	500			500.00
	Receipt For: X Primary General		ycle-to-Date				
	Other (specify)		500.00 F				
_	Full Name (Last, First, Middle Initial) Greg Sabosky			Date of	Receipt		
C.	Mailing Address 5120 Caballeros Ave.				21	′ 201	L2
	City San Luis Obispo	State CA	Zip Code 93401				
	FEC ID number of contributing federal political committee.	C	511683	i i	t of Each Red	· ·	
	Name of Employer S Maria Produce Marketin	Occupation G	ales		50		
	Receipt For: X Primary General Other (specify)	<u> </u>	ycle-to-Date				
\int_{Ω}	SUBTOTAL of Receipts This Page (optional)					1,250	0.00
r	OTAL This Period (last page this line number of				, <u>, , , , , , , , , , , , , , , , , , </u>	4 15	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			Use separate sol for each categor Detailed Summa	y of the	FOR LINE NUMBER: PAGE OF (check only one) 17		
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.				
_	AME OF COMM			· · ·			
V	Matt Bou	itte for Congre	ess				
	ull Name (Last, F	irst, Middle Initial)				Date of Disbursement	
Α	Justin Hooper						
M _	Mailing Address 340 Buchon St.				03 / 10 / 2012		
	State Zip Code CA 93401				Amount of Each Disbursement this Period		
7 P	Musician for fundraisor					200.00	
	Candidate Name Category/ Matt Boutte Category/ Type				-		
∑ © ≤	Office Sought:	X House Senate President District: 24	Disbursement For X Primary Other (s	General			
- 9 ₹		First, Middle Initial)	-			Date of Disbursement	
IV	lailing Address						
C	Sity		State	Zip Code		Amount of Each Disbursement this Period	
P	urpose of Disbur	sement				The second secon	
C	Candidate Name Category/ Type					≈	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General			
	state: uil Name (Last, F	District: First, Middle Initial)	<u></u>	***************************************			
c.	,,					Date of Disbursement	
N	Mailing Address				M M / D D / Y V Y Y		
ō	City State Zip Code					Amount of Each Disbursement this Period	
P	Purpose of Disbursement				Transman		
ō	Candidate Name Category/ Type			4			
ō	Office Sought:	House Senate President	Disbursement For Primary Other (s	General			
s	State:	District:					
SU	BTOTAL of Disb	ursements This Page	e (optional)				

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

Mailing Address						
City		State	ZIP Code			
Original Amount of Loan		Cumulative Payment To Date				
			<u></u>			
TERMS Date Incur	Date Due					
List All Endorsers or Guarantors (if any) to Loan Source						
1. Full Name (Last, First	, Middle Initial)		Name of			
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guarantee Outstandi			
2. Full Name (Last, First,	Middle Initial)		Name of			
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guarantee Outstandi			
3. Full Name (Last, First,	Middle Initial)		Name of			
Mailing Address			Occupation			

LOANS

CHEDULE C (FEC Form 3) DANS	Use separate schedule(s) for each category of the Detailed Summary Page PAGE OF						
AME OF COMMITTEE (In Full)							
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: Primary General						
Mailing Address	Other (specify) ▼						
ty State ZIP Code							
Original Amount of Loan Cumulative Payment							
Date Incurred Date Due Interest Rate Secured: W'M / D D / V V V V V V V V V V V V V V V V							
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)							
OTALS This Period (last page in this line only)							

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

SCHEDULE C-1 (FEC Form 3)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page ____ of Schedule C

IANAT OF OCIMANITEE III E.III					
IAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER			
ENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)			
full Name					
		<u> </u>			
Mailing Address	Date Incurred or Established	<u> </u>			
City State Zip Code	Date Due	Mad / Dad / Arrage			
A. Has loan been restructured? No Yes	If yes, date originally incurred	M M / O O / Y Y Y Y			
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:				
	urod2	AUX. 11 723			
C. Are other parties secondarily liable for the debt incu	nust be reported on Schedule C.)				
D. Are any of the following pledged as collateral for the		What is the value of this collateral?			
property, goods, negotiable instruments, certificates stocks, accounts receivable, cash on deposit, or other	of deposit, chattel papers,	~_^			
No Yes If yes, specify:	__	Joes the lender have a perfected security			
	nterest in it? No Yes				
E. Are any future contributions or future receipts of inte- collateral for the loan? No Yes If yes,	erest income, pledged as specify:	What is the estimated value?			
•	A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).				
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).					
	Address:				
to 11 CFR 100.82(e)(2) and 100.142(e)(2).					
to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established:	Address: City, State, Zip: was pledged for this loan, or if the				
to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: M M / D D / V V V V V V V V V V V V V V V V	Address: City, State, Zip: was pledged for this loan, or if the	s on which it assures repayment.			
Date account established: Date account established: D	Address: City, State, Zip: was pledged for this loan, or if the				
To 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: M M M / D D / Y Y Y Y Y F. If neither of the types of collateral described above exceed the loan amount, state the basis upon which	Address: City, State, Zip: was pledged for this loan, or if the	s on which it assures repayment. DATE			
Typed Name	Address: City, State, Zip: was pledged for this loan, or if the	DATE			
F. If neither of the types of collateral described above exceed the loan amount, state the basis upon which G. COMMITTEE TREASURER Typed Name Signature H. Attach a signed copy of the loan agreement. I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the	Address: City, State, Zip: was pledged for this loan, or if the h this loan was made and the basi	DATE			
E. If neither of the types of collateral described above exceed the loan amount, state the basis upon which the signature H. Attach a signed copy of the loan agreement. I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the are accurate as stated above. II. The loan was made on terms and conditions (similar extensions of credit to other borrowers lill. This institution is aware of the requirement tha	Address: City, State, Zip: was pledged for this loan, or if the h this loan was made and the basi terms of the loan and other inform (including interest rate) no more favor of comparable credit worthiness. at a loan must be made on a basis	DATE mation regarding the extension of the loan orable at the time than those imposed for which assures repayment, and has			
F. If neither of the types of collateral described above exceed the loan amount, state the basis upon which signature H. Attach a signed copy of the loan agreement. I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the are accurate as stated above. II. The loan was made on terms and conditions (similar extensions of credit to other borrowers lill. This institution is aware of the requirement tha complied with the requirements set forth at 11	Address: City, State, Zip: was pledged for this loan, or if the h this loan was made and the basi terms of the loan and other inform (including interest rate) no more favor of comparable credit worthiness. at a loan must be made on a basis	DATE mation regarding the extension of the loan corable at the time than those imposed for which assures repayment, and has no this loan.			
To the best of this institution's knowledge, the are accurate as stated above. It is not the type of collateral described above exceed the loan amount, state the basis upon which the signature. I. To BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the are accurate as stated above. II. The loan was made on terms and conditions (similar extensions of credit to other borrowers in the signature).	Address: City, State, Zip: was pledged for this loan, or if the h this loan was made and the basi terms of the loan and other inform (including interest rate) no more favor of comparable credit worthiness. at a loan must be made on a basis	DATE mation regarding the extension of the loan orable at the time than those imposed for which assures repayment, and has			

SC	HEDULE D (FEC Form 3)	(Use se	e separate PAGE OF			
DEBTS AND OBLIGATIONS sc				FOR LINE NUMBER: (check only one)		
Exc	cluding Loans	numbere		(onesk striy strey	10	
NA	ME OF COMMITTEE (in Full)					
	Matt Boutte for Congress					
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose): Website costs, PO Box,			
	Matt Boutte		Printing costs			
	Mailing Address PO Box 14105					
	City San Luis Obispo, CA Zip Code 93406					
904	Outstanding Balance Beginning This Period O Amount Incurred This Period Payment This Period 272 12	C	Outstandir	ng Balance at Close of	THE PROPERTY OF	
8 4	272.12				and the same of th	
07	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose): Reimburse food purchased for Fund raiser			
031	Deanna Leece Mailing Address	l l				
7	228 Mission Lane		·			
Shring	City State Zip Code San Luis Obispo, CA 93401					
	Outstanding Balance Beginning This Period O Amount Incurred This Period Payment This Period 200. 00			ng Balance at Close of 20	0. 00	
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Na	Nature of Debt (Purpose):			
	Mailing Address					
	City State Zip Code]	
	Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period		The state of the s	ng Balance at Close of		
1)	SUBTOTALS This Period This Page (optional)	>				
2)	TOTALS This Period (last page this line number only)	>				
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)					
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				47	72.12	

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

N	Name of Principal Campaign Committee (In Full) Report Covering Period:								
	From: To:								
l	Mam / Dad / AaAaAa / Dad / AaAaAaA								
	(a) (b) Line No. 11(a) Line No. 11(b) Total Contributions From Indiv./Persons Other Than From Political Party Political Committees Committees								
A									
380									
7849		(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans		
0									
C)	Н								
~	J	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees		
	A								
	В								
		(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees		
	Δ	·							
	В								
		(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee		
	Δ								
	В								
		(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures					
	A								
	В								

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt** Hand Delivered **Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):