

**FEC  
FORM 3X**

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

RECEIVED  
FEC MAIL CENTER

2018 JAN 31 AM 11:59

Office Use Only

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

FRESH START DEMOCRATS

ADDRESS (number and street) PO Box 2193

Check if different than previously reported. (ACC) PALM HARBOR FL 34687-2193

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

C

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

4. TYPE OF REPORT (Choose One)

- 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:
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on MM / DD / YYYY in the State of  

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

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

Election on MM / DD / YYYY in the State of  

5. Covering Period MM / DD / YYYY through MM / DD / YYYY

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 DIANNE L. FECTEAU

Signature of Treasurer *Dianne L. Fecteau* Date MM / DD / YYYY

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

2018-01-31 11:59 AM

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

FRESH START DEMOCRATS

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"/>	<input type="text"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text"/>	<input type="text"/>
(c) Total Receipts (from Line 19) .....	5000	5000
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	5000	5000
7. Total Disbursements (from Line 31).....	4548	4548
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	452	452
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text"/>	<input type="text"/>
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	1100	<input type="text"/>



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

CONVERTED FROM ORIGINAL

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**FRESH START DEMOCRATS**

Report Covering the Period: From:

01 ' 01 ' 2017

To:

12 ' 31 ' 2017

**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).....

500

500

(ii) Unitemized .....

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

(b) Political Party Committees .....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

500

500

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

4,500

4,500

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

5,000

5,000

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

5,000

5,000

NON-FEDERAL ACCOUNT

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

**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 .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	64.8	64.8
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	64.8	64.8
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	500	500
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F) .....		
26. Loan Repayments Made .....	3400	3400
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0	0
29. Other Disbursements (Including Non-Federal Donations) .....	0	0
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	454.8	454.8
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	454.8	454.8

DISBURSEMENTS



**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 **1** OF **10**

<input 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)

**FRESH START DEMOCRATS**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Fecteau, Dianne L**

Mailing Address

**PO Box 942**

City

**Crystal Beach**

State

**FL**

Zip Code

**34681**

FEC ID number of contributing federal political committee.

~~C004~~

Name of Employer (for Individual)

**Self employed**

Occupation (for Individual)

**consultant**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**500**

Date of Receipt

**03 24 2017**

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

**500**

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

**500**

20170608 10:11:00 AM

**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)					PAGE	OF
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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		

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)  
**FRESH START DEMOCRATS**

**A.**

Full Name (Last, First, Middle Initial)  
**THOMAS, MATHEW**

Mailing Address  
**1561 Powder Ridge Court**

City  
**PALM HARBOR** State  
**FL** Zip Code  
**34683**

Purpose of Disbursement  
**CAMPAIGN ~~EXPENSE~~ CONTRIBUTION**

Candidate Name  
**Mathew Thomas**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
**09 / 20 / 2017**

FEC Identification Number  
**C00656363**

Amount of Each Disbursement this Period  
**50.0**

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

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

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

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

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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

**50.0**

20170810 10:00 AM

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

**LOANS**

NAME OF COMMITTEE (In Full)  
**FRESH START DEMOCRATS**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		<b>Election:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>FECTEAU DIANNE L</b>			
<b>Mailing Address</b> <b>PO Box 942</b>			
<b>City</b> <b>CRYSTAL BEACH</b>	<b>State</b> <b>FL</b>	<b>ZIP Code</b> <b>34681</b>	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4,500	3,400	900

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
03 / 24 / 2017	09 / 24 / 2018	5 % (apr)	<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).....	[ ]
<b>TOTALS</b> This Period (last page in this line only).....	4,500

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

2018-01-11 09:00:00



**SCHEDULE C-1 (FEC Form 3X)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Federal Election Commission, Washington, D.C. 20463

Supplementary for  
 Information found on  
 Page \_\_\_\_ of Schedule C

NAME OF COMMITTEE (In Full) <b>FRESH START Democrats</b>			FEC IDENTIFICATION NUMBER <b>C</b>					
LENDING INSTITUTION (LENDER) Full Name <b>None</b>		Amount of Loan <input type="text"/>		Interest Rate (APR) <input type="text"/> %				
Mailing Address			Date Incurred or Established <table style="width:100%; border:none;"> <tr> <td style="border:1px solid black; width:33%; text-align:center;">M M M</td> <td style="border:1px solid black; width:33%; text-align:center;">D D D</td> <td style="border:1px solid black; width:33%; text-align:center;">Y Y Y Y Y Y Y Y</td> </tr> </table>			M M M	D D D	Y Y Y Y Y Y Y Y
M M M	D D D	Y Y Y Y Y Y Y Y						
City	State	Zip Code	Date Due <table style="width:100%; border:none;"> <tr> <td style="border:1px solid black; width:33%; text-align:center;">M M M</td> <td style="border:1px solid black; width:33%; text-align:center;">D D D</td> <td style="border:1px solid black; width:33%; text-align:center;">Y Y Y Y Y Y Y Y</td> </tr> </table>			M M M	D D D	Y Y Y Y Y Y Y Y
M M M	D D D	Y Y Y Y Y Y Y Y						

A. Has loan been restructured?  No  Yes      If yes, date originally incurred 

M M M	D D D	Y Y Y Y Y Y Y Y
-------	-------	-----------------

B. If line of credit,      Total Outstanding Balance:   
 Amount of this Draw:

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_

What is the value of this collateral?

Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, 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).      Location of account: \_\_\_\_\_

Date account established: 

M M M	D D D	Y Y Y Y Y Y Y Y
-------	-------	-----------------

      Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Signature	DATE <table style="width:100%; border:none;"><tr><td style="border:1px solid black; width:33%; text-align:center;">M M M</td><td style="border:1px solid black; width:33%; text-align:center;">D D D</td><td style="border:1px solid black; width:33%; text-align:center;">Y Y Y Y Y Y Y Y</td></tr></table>	M M M	D D D	Y Y Y Y Y Y Y Y
M M M	D D D	Y Y Y Y Y Y Y Y		

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 terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name		DATE <table style="width:100%; border:none;"><tr><td style="border:1px solid black; width:33%; text-align:center;">M M M</td><td style="border:1px solid black; width:33%; text-align:center;">D D D</td><td style="border:1px solid black; width:33%; text-align:center;">Y Y Y Y Y Y Y Y</td></tr></table>		M M M	D D D	Y Y Y Y Y Y Y Y
M M M	D D D	Y Y Y Y Y Y Y Y				
Signature	Title					

2016 RELEASE UNDER E.O. 14176

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

PAGE 9 / OF 10

FOR LINE NUMBER: (check only one)

	9
	10

NAME OF COMMITTEE (In Full)

*FRESH START DEMOCRATS*

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address <i>NONE</i>		
City	State	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
\$	\$	\$

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

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
\$	\$	\$

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

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
\$	\$	\$

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)..... ▶	<i>4500</i>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	<i>4500</i>

2018-01-10 10:00 AM

UNDELIVERED WE TUN



US POSTAGE PAID  
\$7.45

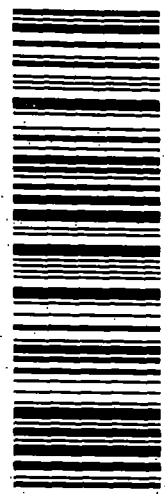
Origin: 34883  
Destination: 20463  
0 LB 2.60 Oz  
Jan 28, 18  
1172300285-04

1004

**PRIORITY MAIL 2-Day®**

Expected Delivery Day: 01/31/2018

**USPS TRACKING NUMBER**

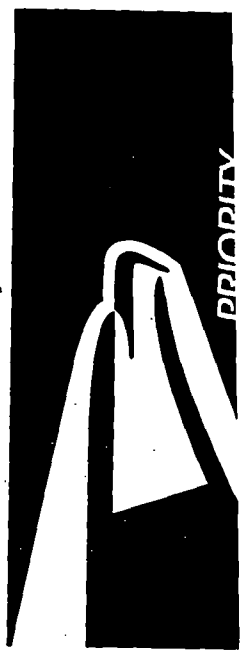


9505 5141 6292 8029 2161 62

93


-bor, FL 34682

FEDERAL Election Commission  
999 E ST, NW  
WASHINGTON, DC 20463



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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
Postmarked	
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input checked="" type="checkbox"/> USPS Priority Mail	Postmarked 1/29/18
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
 PREPARER  
 (3/2015)

1/31/2018  
 DATE PREPARED

20180131 10:00:00 AM