

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

CalPortland Company Political Action Committee (CALPORTLAND PAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>		57494.79
(b) Cash on Hand at Beginning of Reporting Period.....	135144.79	
(c) Total Receipts (from Line 19)	1385.00	86535.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	136529.79	144029.79
7. Total Disbursements (from Line 31).....	0.00	7500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	136529.79	136529.79
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	5111.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

CalPortland Company Political Action Committee (CALPORTLAND PAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1385.00	85344.00
(ii) Unitemized	0.00	1191.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1385.00	86535.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1385.00	86535.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1385.00	86535.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1385.00	86535.00

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	7500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	7500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	7500.00

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1385.00	86535.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1385.00	86535.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CalPortland Company Political Action Committee (CALPORTLAND PAC)

A. Eminhizer, Marcus, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20321 E. Covina Hills Rd.
 City Covina State CA Zip Code 91724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) California Portland Cement Occupation (for Individual) District Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 07 / 07 / 2021
Transaction ID : SA11AI.8625
 Amount of Each Receipt this Period 125.00
 Memo Item

B. LEININGER, KERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 MASSACHUSETTS AVE NE
 City WASHINGTON DC State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALPORTLAND Occupation (for Individual) GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 15 / 2021
Transaction ID : SA11AI.8632
 Amount of Each Receipt this Period 650.00
 Memo Item

C. Mullen, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2400 N Central Ave
 City Phoenix State AZ Zip Code 85004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Calportland Occupation (for Individual) General Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1470.00

Date of Receipt 07 / 19 / 2021
Transaction ID : SA11AI.8627
 Amount of Each Receipt this Period 210.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	985.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
CalPortland Company Political Action Committee (CALPORTLAND PAC)

A. Nieman, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7107 April Wind Ave
 City Las Vegas State NV Zip Code 89131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CalPortland Company Occupation (for Individual) Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 06 / 2021
Transaction ID : SA11AI.8631
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Padilla, Jamie, A., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 Scorpios Island
 City Henderson State NV Zip Code 89012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) California Portland Cement Occupation (for Individual) Terminal Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1091.00

Date of Receipt 07 / 02 / 2021
Transaction ID : SA11AI.8622
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Pham, Dusting, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14008 Ballentine Place
 City Baldwin Park State CA Zip Code 91706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CalPortland Company Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 02 / 2021
Transaction ID : SA11AI.8623
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
CalPortland Company Political Action Committee (CALPORTLAND PAC)

A. Pollard, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16151 Sunny Court
 City Whittier State CA Zip Code 90603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) California Portland Cement Occupation (for Individual) Operations Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2021
Transaction ID : SA11AI.8619
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Pollard, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16151 Sunny Court
 City Whittier State CA Zip Code 90603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) California Portland Cement Occupation (for Individual) Operations Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2021
Transaction ID : SA11AI.8628
 Amount of Each Receipt this Period 50.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	1385.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6733**
CalPortland Company Political Action Committee (CALPORTLAND PAC)

LOAN SOURCE Full Name (Last, First, Middle Initial) Anderson, Douglas, D., ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 10032 E Winter Sun Drive				
City Scottsdale	State AZ	ZIP Code 85262		

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

Date Incurred MM / DD / YYYY 03 / 23 / 2014	Date Due MM / DD / YYYY	Interest Rate % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: []

SUBTOTALS This Period This Page (optional)	▶	[] 2600.00
TOTALS 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 (FEC Form 3X)

LOANS

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

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

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

Date Incurred MM / DD / YYYY 03 / 03 / 2014	Date Due MM / DD / YYYY	Interest Rate % (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: []

SUBTOTALS This Period This Page (optional)	▶	[] 2501.00
TOTALS 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 (FEC Form 3X)

LOANS

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

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

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

TERMS

Date Incurred MM / DD / YYYY 03 / 26 / 2014	Date Due MM / DD / YYYY	Interest Rate % (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: []

SUBTOTALS This Period This Page (optional)	▶	[] 10.00
TOTALS This Period (last page in this line only)	▶	[] 5111.00

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