

**FEC
FORM 3X**

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

RECEIVED

2014 MAR -7 AM 10:05

Office Use Only **FEC MAIL CENTER**

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

INDEPENDENT OIL PRODUCERS' AGENCY

ADDRESS (number and street)

4520 CALIFORNIA AVENUE

SUITE 230



Check if different than previously reported. (ACC)

BAKERSFIELD CA 93309

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00183434

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

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

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

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

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
07 / 01 / 2013

through

MM / DD / YYYY
09 / 30 / 2013

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 Paul Hancock

Signature of Treasurer

Paul Hancock

Date

MM / DD / YYYY
03 / 05 / 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

FEC FORM 3X
Rev. 12/2004

14031193003

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

INDEPENDENT OIL PRODUCERS' AGENCY

Report Covering the Period:

From:

07 / 01 / 2013

To:

09 / 30 / 2013

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2013		51,460.88
(b) Cash on Hand at Beginning of Reporting Period.....	48,960.88	
(c) Total Receipts (from Line 19)	0.00	0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	48,960.88	51,460.88
7. Total Disbursements (from Line 31).....	2,750.00	5,250.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	46,210.88	46,210.88
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on 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

14031193004

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

INDEPENDENT OIL PRODUCERS' AGENCY

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).....	<input type="text"/>	<input type="text"/>
(ii) Unitemized.....	<input type="text"/>	<input type="text"/>
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	<input type="text"/>	<input type="text"/>
(b) Political Party Committees.....	<input type="text"/>	<input type="text"/>
(c) Other Political Committees (such as PACs).....	<input type="text"/>	<input type="text"/>
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶	<input type="text"/>	<input type="text"/>
12. Transfers From Affiliated/Other Party Committees.....	<input type="text"/>	<input type="text"/>
13. All Loans Received.....	<input type="text"/>	<input type="text"/>
14. Loan Repayments Received.....	<input type="text"/>	<input type="text"/>
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	<input type="text"/>	<input type="text"/>
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	<input type="text"/>	<input type="text"/>
17. Other Federal Receipts (Dividends, Interest, etc.).....	<input type="text"/>	<input type="text"/>
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	<input type="text"/>	<input type="text"/>
(b) Levin Funds (from Schedule H5).....	<input type="text"/>	<input type="text"/>
(c) Total Transfers (add 18(a) and 18(b))..	<input type="text"/>	<input type="text"/>
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

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DETAILED SUMMARY PAGE
of Disbursements

14031193006

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		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,750.00	5,250.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
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))		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(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)) ..	2,750.00	5,250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	2,750.00	5,250.00

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

33. Total Contributions (other than loans) (from Line 11(d), page 3)		
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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**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 1 OF 1

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
INDEPENDENT OIL PRODUCERS' AGENCY

Full Name*(Last, First, Middle Initial)

A. RUBIO VICTORY COMMITTEE

Mailing Address
PO BOX 8533

City State Zip Code
EMERYVILLE, CA 94662

Purpose of Disbursement
CONTRIBUTION

Candidate Name
MARCO RUBIO

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2013

Amount of Each Disbursement this Period

500.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. VALADAO FOR CONGRESS

Mailing Address
PO BOX 839

City State Zip Code
HANFORD, CA 93232

Purpose of Disbursement
CONTRIBUTION

Candidate Name
DAVID VALADAO

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2013

Amount of Each Disbursement this Period

1,000.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. WALTERS FOR CONGRESS

Mailing Address
30151 TOMAS

City State Zip Code
RANCHO SANTA MARGARITA, CA 92688

Purpose of Disbursement
CONTRIBUTION

Candidate Name
MIMI WALTERS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2013

Amount of Each Disbursement this Period

500.00

Category/
Type

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

2,000.00

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

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**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 1 OF 1			
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <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)
INDEPENDENT OIL PRODUCERS' AGENCY

Full Name (Last, First, Middle Initial) A. WALTERS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 25 / 2013
Mailing Address 30151 TOMAS		Amount of Each Disbursement this Period 250.00
City RANCHO SANTA MARGARITA, CA	State Zip Code 92688	
Purpose of Disbursement CONTRIBUTION		Category/Type <input type="checkbox"/>
Candidate Name MIMI WALTERS		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. DEVIN NUNES CAMPAIGN COMMITTEE		Date of Disbursement MM / DD / YYYY 09 / 25 / 2013
Mailing Address PO BOX 6545		Amount of Each Disbursement this Period 250.00
City VISALIA, CA	State Zip Code 93290	
Purpose of Disbursement CONTRIBUTION		Category/Type <input type="checkbox"/>
Candidate Name DEVIN NUNES		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. IPAA WILDCATTERS FUND		Date of Disbursement MM / DD / YYYY 09 / 25 / 2013
Mailing Address 1201 15TH STREET NW		Amount of Each Disbursement this Period 250.00
City WASHINGTON, DC	State Zip Code 20005	
Purpose of Disbursement CONTRIBUTION		Category/Type <input type="checkbox"/>
Candidate Name KEVIN MCCARTHY		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	2,750.00

14031193009

14031193010

FedEx IT

Date

Sender's Name Juanita Silva Phone 651 377-0411

Company INDEPENDENT OIL PRODUCERS

Address 4520 CALIFORNIA AVE STE 230

City BAKERSFIELD State CA ZIP 93309-4064

2 Your Internal Billing Reference

3 To Recipient's Name Federal Election Phone

Company Committee HOLD Weekday Print FedEx location address below. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.

Address 999 E. Street NW We cannot deliver to P.O. boxes or P.O. ZIP codes.

Address Washington Print FedEx location address here if HOLD option is selected.

City Washington State DC ZIP 20463

0413612151



8710 1834 7779

The World On Time.

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FedEx TRACKING 8710 1834 7779

20463 DC-US IAD

7779 03:07

FZ

RT 677 6

FEC MAIL CENTER

2014 MAR -7 AM 10:05

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FTD 934263 06MAR14 BFLA 51AC1/CC4F/65DD

FedEx Standard Overnight Saturday Delivery NOT available.

FedEx 2Day Thursday through Saturday Delivery is selected.

FedEx 1Day Freight Next business day. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

FedEx 3Day Freight Second business day. Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

FedEx 3Day Freight Third business day. Saturday Delivery NOT available.

5 Packaging FedEx Envelope* FedEx Pak* Small Pak, FedEx Large Pak, and FedEx Sturdy Pak. *Declared value limit \$500.

6 Special Handling and Delivery Signature Options SATURDAY Delivery. NOT available for FedEx Standard Overnight, FedEx First Overnight, FedEx Express Saver, or FedEx 2Day Freight.

No Signature Required Packages may be left without obtaining a signature for delivery. Direct Signature. Someone at recipient's address may sign for delivery. Indirect Signature. If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only, see options.

Does this shipment contain dangerous goods? No Yes. Shipper's Declaration not required. Yes. Shipper's Declaration required. One box must be checked. Dry Ice. Dry Ice LIN 1845 Cargo Aircraft Only.

7 Payment Bill to: Sender Recipient Third Party Credit Card Cash/Check. Enter FedEx Acct. No. or Credit Card No. below.

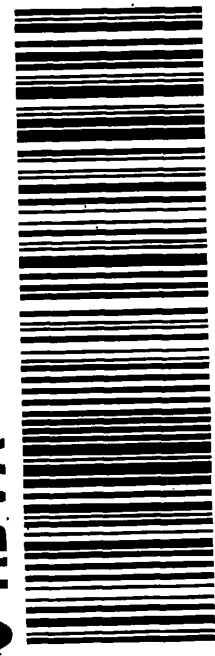
Total Packages Total Weight Credit Card Auth.

Your liability is limited to \$100 unless you declare a higher value. See the current FedEx Services Guide for details.

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FRI - 07 MAR AA STANDARD OVERNIGHT



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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.

14031193011

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): Fed Ex Next Business Day Delivery <input checked="" type="checkbox"/>	Shipping Date 3/6/14
<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 / 7 / 14 DATE PREPARED

(8/2013)