

**FEC  
FORM 3X**

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

RECEIVED  
FEC MAIL CENTER  
2016 OCT 28 AM 9:55

Office Use Only

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

Check if different than previously reported. (ACC) SUITE 230  
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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11)<br><small>(Non-Election Year Only)</small> |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12)<br><small>(Non-Election Year Only)</small> |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> 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 10 / 01 / 2016 through MM / DD / YYYY 10 / 19 / 2016

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 Sidney Hessler

Signature of Treasurer

*Sidney Hessler*

Date

MM / DD / YYYY 10 / 26 / 2016

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							
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**FEC FORM 3X**  
Rev. 12/2004

20161010 10:00:01 00183434

**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:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		41,560.88
(b) Cash on Hand at Beginning of Reporting Period.....	40,060.88	
(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).....	40,060.88	41,560.88
7. Total Disbursements (from Line 31).....	500.00	2,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	39,560.88	39,560.88
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

**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:

MM / DD / YYYY  
10 / 01 / 2016

To:

MM / DD / YYYY  
10 / 19 / 2016

**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).....

.....

.....

(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).....▶

.....

.....

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

.....

.....

13. All Loans Received.....

.....

.....

14. Loan Repayments Received.....

.....

.....

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))..

.....

.....

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

..... 0.00

..... 0.00

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

..... 0.00

..... 0.00

20161019 10:28:01 AM CDT

**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 .....		
(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 .....		
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 .....	500.00	2,000.00
(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))..	500.00	2,000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	500.00	2,000.00

NON-FEDERAL DISBURSEMENTS

### 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) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
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

11030101000001000001

**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 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 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. VALADAO FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016
Mailing Address PO BOX 839		Amount of Each Disbursement this Period 500.00
City HANFORD, CA	State CA	
Zip Code 93232	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name DAVID VALADAO	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.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	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.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	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).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

2016-10-20 10:00:00 AM

# FedEx

## Express

STATION 1-00 : SPEC MAIL CENTER-10N

2016 OCT 28 AM 9:55

The World

**FedEx**  
TRK# 8076 0388 1410  
3215

THU - 27 OCT AA  
STANDARD OVERNIGHT

20463  
DC-US  
IAD

**XC RDVA**



FID 5124459 26OCT16 BFLA 539C3/FBA2/BEBA

**FedEx** Package  
Express US Airbill

FedEx Tracking Number 8076 0388 1410

Form ID No. 0215

Recipient's Copy

**1 From**

Date: [Redacted]

Sender's Name: **LESLIE CLARK** Phone: **661 377-0414**

Company: **INDEPENDENT OIL PRODUCERS**

Address: **4520 CALIFORNIA AVE STE 230**

City: **BAKERSFIELD** State: **CA** ZIP: **93309-1190**

**2 Your Internal Billing Reference**

**3 To**

Recipient's Name: **FEC** Phone: [Redacted]

Company: **FEC**

Address: **999 E Street NW**

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room: [Redacted]

**HOLD Weekday**  
FedEx location address REQUIRED. NOT available for FedEx First Overnight.

**HOLD Saturday**  
FedEx location address REQUIRED. NOT available for FedEx First Overnight.

**4 Express Package Service** \*To most locations.  
NOTE: Service order has changed. Please select carefully.

Packages up to 150 lbs.  
For packages over 150 lbs., use the FedEx Express Freight US Airbill.

**Next Business Day**

FedEx First Overnight  
Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

FedEx Priority Overnight  
Next business morning.\* Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

FedEx Standard Overnight  
Next business afternoon.\* Saturday Delivery NOT available.

**2 or 3 Business Days**

FedEx 2Day A.M.  
Second business morning.\* Saturday Delivery NOT available.

FedEx 2Day  
Second business afternoon.\* Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

FedEx Express Saver  
Third business day.\* Saturday Delivery NOT available.

**5 Packaging** \*Declared value limit \$500.

FedEx Envelope\*  FedEx Pak\*  FedEx Box  FedEx Tube  Other

**6 Special Handling and Delivery Signature Options**

**SATURDAY Delivery**  
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

**No Signature Required**  
Package may be left without obtaining a signature for delivery.

**Direct Signature**  
Someone at recipient's address may sign for delivery. Fee applies.

**Indirect Signature**  
If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only. Fee applies.

**Does this shipment contain dangerous goods?**

One box must be checked.

No  Yes As per attached Shipper's Declaration.  Yes Shipper's Declaration not required.  Dry Ice Dry ice, 9 UN 1845 \_\_\_\_\_ x \_\_\_\_\_ kg

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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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Ex* Shipping Date  
*10/26/16*  
Next Business Day Delivery

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

Other (Specify): Date of Receipt or Postmarked

*[Signature]*  
 PREPARER

*10/28/16*  
 DATE PREPARED

20161010 10:28:01 AM EDT