

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Mayor Bill Wells for Congress

ADDRESS (number and street) 7918 El Cajon Blvd # N162 La Mesa CA 91942-6719

2. FEC IDENTIFICATION NUMBER C C00670489 3. IS THIS REPORT NEW (N) OR AMENDED (A) CA 50

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) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2019 through M M / D D / Y Y Y Y 03 / 31 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Baber, William, R., Type or Print Name of Treasurer Signature of Treasurer Baber, William, R., [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 16 / 2019

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Mayor Bill Wells for Congress

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

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|-----------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 7760.00 | 7760.00 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 7760.00 | 7760.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 2203.33 | 2575.33 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 2203.33 | 2575.33 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 11599.48 | |
| 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)..... | 0.00 | |

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 3 (Revised 05/2016)

Write or Type Committee Name

Mayor Bill Wells for Congress

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

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 7700.00 | 7700.00 |
| (ii) Unitemized..... | 60.00 | 60.00 |
| (iii) TOTAL of contributions from individuals ▶ | 7760.00 | 7760.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 7760.00 | 7760.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 7760.00 | 7760.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 9

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 2203.33 | 2575.33 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. 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 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 250.00 | 250.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 2453.33 | 2825.33 |

III. CASH SUMMARY

| | |
|---------------------------------------------------------------------------------------|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 6292.81 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 7760.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 14052.81 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 2453.33 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 11599.48 |

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 9
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mayor Bill Wells for Congress

A. Full Name (Last, First, Middle Initial)
Alessio, Kristine, C., ,
Mailing Address 4647 Garfield Street

City: La Mesa State: CA Zip Code: 91941-5403

FEC ID number of contributing federal political committee: **C**

Name of Employer: City of La Mesa Occupation: City Council Member

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2019

Transaction ID : **A64D9B419A5A74C3B978**

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Barka, Noori, , ,
Mailing Address 1555 Willow Glen Dr.

City: El Cajon State: CA Zip Code: 92019-2882

FEC ID number of contributing federal political committee: **C**

Name of Employer: CalBiotech Occupation: President

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 21 / 2019

Transaction ID : **A310C8DC45AFF4F58861**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Giordano, Lea, , ,
Mailing Address 9367 Alto Drive

City: La Mesa State: CA Zip Code: 91941-4225

FEC ID number of contributing federal political committee: **C**

Name of Employer: Retired Occupation: Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 06 / 2019

Transaction ID : **A9619E5894F5544A69E8**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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

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

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 6 OF 9 | |
| | <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
Mayor Bill Wells for Congress

A. Full Name (Last, First, Middle Initial)
Juhnke, Brian, , ,

Mailing Address 2526 Camino Avena

| | | |
|----------------|-------------|------------------------|
| City Alpine | State CA | Zip Code 91901-3057 |
|----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-------------------------------------------|------------------------------|
| Name of Employer Motoworld of El Cajon | Occupation Owner/Operator |
|-------------------------------------------|------------------------------|

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2019

Transaction ID : A938D5951D4C84B8CB79

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Rhoads, Richard, , ,

Mailing Address 1201 Sundale Rd

| | | |
|------------------|-------------|------------------------|
| City El Cajon | State CA | Zip Code 92019-3768 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------------------------|--------------------------|
| Name of Employer University Compounding Pharmacy | Occupation Pharmacist |
|-----------------------------------------------------|--------------------------|

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2019

Transaction ID : A54C05BC6E91446F0915

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Toma, Hani, , ,

Mailing Address 1090 Broadway

| | | |
|------------------|-------------|------------------------|
| City El Cajon | State CA | Zip Code 92021-4803 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|----------------------------------|-------------------|
| Name of Employer American Ice | Occupation CEO |
|----------------------------------|-------------------|

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2019

Transaction ID : A0C20CB263D824D4A983

Amount of Each Receipt this Period
2700.00

Memo Item

| | |
|------------------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5200.00 |
| TOTAL This Period (last page this line number only).....▶ | 7700.00 |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 9 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Mayor Bill Wells for Congress

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Baber, William, R., , | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2019 | | |
| Mailing Address 7918 El Cajon Blvd. #N-162 | | | | | |
| City La Mesa | State CA | Zip Code 91942-6719 | FEC Identification Number C | | |
| Purpose of Disbursement Treasurer | | Category/ Type 003 | Amount of Each Disbursement this Period 300.00 | | |
| Candidate Name | | Transaction ID : B48D8121868504343AC2 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item | | |
| State: District: | | | | | |

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Baber, William, R., , | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2019 | | |
| Mailing Address 7918 El Cajon Blvd. #N-162 | | | | | |
| City La Mesa | State CA | Zip Code 91942-6719 | FEC Identification Number C | | |
| Purpose of Disbursement Treasurer | | Category/ Type 003 | Amount of Each Disbursement this Period 500.00 | | |
| Candidate Name | | Transaction ID : B28CE8255410848749E6 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item | | |
| State: District: | | | | | |

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Baber, William, R., , | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2019 | | |
| Mailing Address 7918 El Cajon Blvd. #N-162 | | | | | |
| City La Mesa | State CA | Zip Code 91942-6719 | FEC Identification Number C | | |
| Purpose of Disbursement Treasurer | | Category/ Type 003 | Amount of Each Disbursement this Period 500.00 | | |
| Candidate Name | | Transaction ID : BB2530700A9C14AF58D1 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item | | |
| State: District: | | | | | |

| | |
|------------------------------------------------------------------|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1300.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|-------------------------------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 8 OF 9 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Mayor Bill Wells for Congress

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Baber, William, R., , | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2019 | |
| Mailing Address 7918 El Cajon Blvd. #N-162 | | | FEC Identification Number C | |
| City La Mesa | State CA | Zip Code 91942-6719 | Amount of Each Disbursement this Period 183.80 | |
| Purpose of Disbursement Envelopes | | Category/ Type 003 | Transaction ID : B0B02EF6B5C4A4CBDBBB | |
| Candidate Name | | | <input type="checkbox"/> Memo Item | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Efundraising | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2019 | |
| Mailing Address 2831 G St Steet #120 | | | FEC Identification Number C | |
| City Sacramento | State CA | Zip Code 95816-3783 | Amount of Each Disbursement this Period 50.00 | |
| Purpose of Disbursement Credit Card Fee | | Category/ Type | Transaction ID : B6B776CDFC1994FF9B17 | |
| Candidate Name | | | <input type="checkbox"/> Memo Item | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) c. Efundraising | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2019 | |
| Mailing Address 2831 G St Steet #120 | | | FEC Identification Number C | |
| City Sacramento | State CA | Zip Code 95816-3783 | Amount of Each Disbursement this Period 152.50 | |
| Purpose of Disbursement Credit Card Fee | | Category/ Type | Transaction ID : BD4628BBEE47B4A0CAE5 | |
| Candidate Name | | | <input type="checkbox"/> Memo Item | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | |
|------------------------------------------------------------------|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 386.30 |
| TOTAL This Period (last page this line number only).....▶ | 1686.30 |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 9 |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Mayor Bill Wells for Congress

A. AIPAC

Full Name (Last, First, Middle Initial)
Mailing Address 6310 S San Vicente Blvd # 275,

City Los Angeles State CA Zip Code 90048-5454

Purpose of Disbursement Charity Event 012 Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 07 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 250.00

Transaction ID : B6AB20E9A78C241E5B98

Memo Item

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

| | |
|------------------------------------------------------------------|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 250.00 |
| TOTAL This Period (last page this line number only).....▶ | 250.00 |