



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**COMMITTEE TO ELECT DIEDRA GREENAWAY FOR CONGRESS 2018**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	2557.48	2557.48
(b) Total Contribution Refunds (from Line 20(d)) .....	500.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	2057.48	2057.48
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	2057.48	2057.48
(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)).....	2057.48	2057.48
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	0.00	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	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

**COMMITTEE TO ELECT DIEDRA GREENAWAY FOR CONGRESS 2018**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2557.48	2557.48
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	2557.48	2557.48
(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))..	2557.48	2557.48
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	1700.00	1700.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	1700.00	1700.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	4257.48	4257.48

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2057.48	2057.48
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 .....	1700.00	1700.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	1700.00	1700.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	500.00	500.00
(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)).....	500.00	500.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	4257.48	4257.48

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4257.48
25. SUBTOTAL (add Line 23 and Line 24).....	4257.48
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4257.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

**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 15  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT DIEDRA GREENAWAY FOR CONGRESS 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Anedot**  
 Mailing Address 5555 Hilton Ave., Suite 106  
 City Baton Rouge State LA Zip Code 70808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 25 2017  
**Transaction ID : INCA4**  
 Amount of Each Receipt this Period  
 175.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Bryant, Floyd, , ,**  
 Mailing Address 3061 NW 58th St.  
 City Miami State FL Zip Code 33142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Wah Hung Group Marketing Manager  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 23 2017  
**Transaction ID : IDTA1**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Anedot**  
 Mailing Address 5555 Hilton Ave., Suite 106  
 City Baton Rouge State LA Zip Code 70808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 27 2017  
**Transaction ID : INCA10**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00  
**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: PAGE 6 OF 15  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT DIEDRA GREENAWAY FOR CONGRESS 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Greenaway, Diedra M., , ,**  
Mailing Address 1510 Thomas Drive

City Lancaster State CA Zip Code 93535

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

Name of Employer California State University, Northridg Occupation Educator

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2017

**Transaction ID : PAYA19**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Greenaway, Diedra M., , ,**  
Mailing Address 1510 Thomas Drive

City Lancaster State CA Zip Code 93535

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

Name of Employer California State University, Northridg Occupation Educator

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2017

**Transaction ID : PAYA18**

Amount of Each Receipt this Period  
1200.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Political Reporting Plus**  
Mailing Address 111 N. La Brea Ave., Suite 408

City Inglewood State CA Zip Code 90301-4604

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

Name of Employer Occupation

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
632.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2017

**Transaction ID : PAYA17**

Amount of Each Receipt this Period  
632.48

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2332.48
<b>TOTAL</b> This Period (last page this line number only)..... ▶	2557.48

**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 7 OF 15	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT DIEDRA GREENAWAY FOR CONGRESS 2018**

<b>A.</b> Full Name (Last, First, Middle Initial) Greenaway, Diedra M., , , Mailing Address 1510 Thomas Drive			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2017	
City Lancaster	State CA	Zip Code 93535	<b>Transaction ID : PAYA3</b>	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1200.00	
Name of Employer California State University, Northridg		Occupation Educator	<input type="checkbox"/> Memo Item	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3400.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Greenaway, Diedra M., , , Mailing Address 1510 Thomas Drive			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 10 / 2017	
City Lancaster	State CA	Zip Code 93535	<b>Transaction ID : PAYA14</b>	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer California State University, Northridg		Occupation Educator	<input type="checkbox"/> Memo Item	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ June Oeinar		Election Cycle-to-Date ▼ 3400.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mailing Address			Date of Receipt M M / D D / Y Y Y Y Y Y	
City	State	Zip Code		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period	
Name of Employer		Occupation	<input type="checkbox"/> Memo Item	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1700.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	1700.00

**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 8 OF 15			
	<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)  
**COMMITTEE TO ELECT DIEDRA GREENAWAY FOR CONGRESS 2018**

Full Name (Last, First, Middle Initial) <b>A. Political Reporting Plus</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2017
Mailing Address 111 N. La Brea Ave., Suite 408		FEC Identification Number C
City Inglewood	State CA	Zip Code 90301-4604
Purpose of Disbursement Political Accounting Services		001 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 750.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ P2018	Transaction ID : EXPB6 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Andreas Branch Photography</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2017
Mailing Address 4718 Kester Ave., #204		FEC Identification Number C
City Sherman Oaks	State CA	Zip Code 91403
Purpose of Disbursement Photography Services		006 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 150.00
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) ▼	Transaction ID : EXPB8 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. L.A. Business Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2017
Mailing Address 6840 La Cienega Blvd.		FEC Identification Number C
City Inglewood	State CA	Zip Code 90302
Purpose of Disbursement Remit Envelopes		006 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 137.50
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) ▼	Transaction ID : EXPB9 <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1037.50
<b>TOTAL</b> This Period (last page this line number only).....▶	



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : EXPB6

Partial Payment

Form/Schedule:

Transaction ID:

**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 10 OF 15	
	<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)  
**COMMITTEE TO ELECT DIEDRA GREENAWAY FOR CONGRESS 2018**

Full Name (Last, First, Middle Initial) <b>A. Political Reporting Plus</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2017
Mailing Address 111 N. La Brea Ave., Suite 408		FEC Identification Number C
City Inglewood	State CA	Zip Code 90301-4604
Purpose of Disbursement Debt Forgiven		Amount of Each Disbursement this Period 632.48
Candidate Name		Transaction ID : PAYB17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <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>B. Political Reporting Plus</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2017
Mailing Address 111 N. La Brea Ave., Suite 408		FEC Identification Number C
City Inglewood	State CA	Zip Code 90301-4604
Purpose of Disbursement Political Accounting Services		Amount of Each Disbursement this Period 367.52
Candidate Name		Transaction ID : EXPB15
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ P2018	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2037.50

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : EXPB15

Committee Terminated

Form/Schedule:

Transaction ID:

**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 12 OF 15	
	<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)  
**COMMITTEE TO ELECT DIEDRA GREENAWAY FOR CONGRESS 2018**

Full Name (Last, First, Middle Initial) <b>A. Greenaway, Diedra M., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2017	
Mailing Address 1510 Thomas Drive			FEC Identification Number C	
City Lancaster	State CA	Zip Code 93535	Amount of Each Disbursement this Period 1200.00	
Purpose of Disbursement			Transaction ID : PAYB18	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Greenaway, Diedra M., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2017	
Mailing Address 1510 Thomas Drive			FEC Identification Number C	
City Lancaster	State CA	Zip Code 93535	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement			Transaction ID : PAYB19	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			Memo Item	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1700.00

# 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 13 OF 15			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT DIEDRA GREENAWAY FOR CONGRESS 2018**

Full Name (Last, First, Middle Initial) <b>A. Fowler, Dallas, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2017		
Mailing Address 850 S Byrd Ave, Suite 6					
City Inglewood	State CA	Zip Code 90305	FEC Identification Number C		
Purpose of Disbursement		Category/ Type 010	Amount of Each Disbursement this Period 500.00		
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : EXPB12		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	500.00

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

NAME OF COMMITTEE (In Full) Transaction ID : PAYC3  
**COMMITTEE TO ELECT DIEDRA GREENAWAY FOR CONGRESS 2018**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Greenaway, Diedra M., , ,		Election: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1510 Thomas Drive		<input type="checkbox"/> Personal Funds of the Candidate
City Lancaster	State CA	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1200.00	1200.00	0.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 10 / D 21 / Y 2017	M / D / Y 10/21/2018	0.00 % (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).....▶	0.00
<b>TOTALS</b> 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 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC14**  
**COMMITTEE TO ELECT DIEDRA GREENAWAY FOR CONGRESS 2018**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Greenaway, Diedra M., , ,		<input type="checkbox"/> Memo Item	Election: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ June Oeinar
Mailing Address 1510 Thomas Drive			
City Lancaster	State CA	ZIP Code 93535	<input type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 500.00	Cumulative Payment To Date 500.00	Balance Outstanding at Close of This Period 0.00
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<b>TERMS</b>	Date Incurred M 11 / D 10 / Y 2017	Date Due M M / D D / Y 11/10/2018	Interest Rate (If none, enter 0) 0.00 % (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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	0.00
<b>TOTALS</b> This Period (last page in this line only).....▶	0.00

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