

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

CITIZENS FOR WATERS

ADDRESS (number and street) 249 E Ocean Blvd # 685

Check if different than previously reported. (ACC)

Long Beach CA 90802

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼ C C00167585

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

STATE ▼ DISTRICT
CA 43

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 through M M / D D / Y Y Y Y

01 / 01 / 2017 through 03 / 31 / 2017

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 GOULD, DAVID, , ,

Signature of Treasurer GOULD, DAVID, , , [Electronically Filed] Date M M / D D / Y Y Y Y

09 / 19 / 2017

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
CITIZENS FOR WATERS

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))....	12008.79	26488.21
(b) Total Contribution Refunds (from Line 20(d))	20.83	20.83
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	11987.96	26467.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	41041.06	128285.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	200.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	41041.06	128085.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	151373.56	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	25000.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	135466.26	

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

CITIZENS FOR WATERS

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).....	6700.00	0.00
(ii) Unitemized	2808.79	0.00
(iii) TOTAL of contributions from individuals	9508.79	23988.21
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	12008.79	26488.21
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	200.00
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).....	12008.79	26688.21

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.....	41041.06	128285.02
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	20.83	20.83
(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)).....	20.83	20.83
21. OTHER DISBURSEMENTS	1100.00	1735.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	42161.89	130040.85

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	181525.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	12008.79
25. SUBTOTAL (add Line 23 and Line 24).....	193534.44
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	42161.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	151373.56

**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 25
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
CITIZENS FOR WATERS

A. Full Name (Last, First, Middle Initial)
Abel, Marlene, , ,
 Mailing Address 634 hanley Ave
 City Los Angeles State CA Zip Code 90049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation attorney
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2017
Transaction ID : 11AI-10094-I
 Amount of Each Receipt this Period
 100.00
 Memo Item
 Earmarked through ACTBLUE. Date received by conduit in memo record below.

B. Full Name (Last, First, Middle Initial)
ACTBLUE
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3856.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 09 / 2017
Transaction ID : 11AI-10094-I-MEMO
 Amount of Each Receipt this Period
 100.00
 Memo Item
 Total earmarked through conduit, PAC limits not affected.

C. Full Name (Last, First, Middle Initial)
Abel, Marlene, , ,
 Mailing Address 634 hanley Ave
 City Los Angeles State CA Zip Code 90049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation attorney
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2017
Transaction ID : 11AI-10188-I
 Amount of Each Receipt this Period
 100.00
 Memo Item
 Earmarked through ACTBLUE. Date received by conduit in memo record below.

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 25
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR WATERS

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3856.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 09 / 2017

Transaction ID : 11AI-10188-I-MEMO

Amount of Each Receipt this Period
100.00

Memo Item

Total earmarked through conduit, PAC limits not affected.

B. Full Name (Last, First, Middle Initial)
Abel, Marlene, , ,

Mailing Address 634 hanley Ave

City Los Angeles State CA Zip Code 90049

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

Name of Employer Occupation
self attorney

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 12 / 2017

Transaction ID : 11AI-10222-I

Amount of Each Receipt this Period
100.00

Memo Item

Earmarked through ACTBLUE. Date recieved by conduit in memo record below.

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3856.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 09 / 2017

Transaction ID : 11AI-10222-I-MEMO

Amount of Each Receipt this Period
100.00

Memo Item

Total earmarked through conduit, PAC limits not affected.

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 7 OF 25
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR WATERS

A. Full Name (Last, First, Middle Initial)
Arnold, Evelyn, , ,
 Mailing Address 415 Old Ranch Rd.
 City Seal Beach State CA Zip Code 90740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Century 21 Excellence Occupation Realtor/Broker
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2017
Transaction ID : 11AI-10232
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Gauthier, Michael, , ,
 Mailing Address 828 Lord Rd
 City Sanbornville State NH Zip Code 3872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation self-employed
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : 11AI-10248-I
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Earmarked through ACTBLUE. Date recieved by conduit in memo record below.

C. Full Name (Last, First, Middle Initial)
ACTBLUE
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3856.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2017
Transaction ID : 11AI-10248-I-MEMO
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Total earmarked through conduit, PAC limits not affected.

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
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 8 OF 25
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR WATERS

A. Full Name (Last, First, Middle Initial)
Guzel, Murat, , ,
 Mailing Address 52 E. Union Blvd.
 City Bethlehem State PA Zip Code 18018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2017
Transaction ID : 11AI-10218
 Amount of Each Receipt this Period
 2700.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Guzel, Zynep, , ,
 Mailing Address 52 E. Union Blvd.
 City Bethlehem State PA Zip Code 18018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2017
Transaction ID : 11AI-10219
 Amount of Each Receipt this Period
 2700.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Witt, Kathleen, , ,
 Mailing Address 25 E Calle Claravista
 City Tucson State AZ Zip Code 85716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Witt Financial Occupation wealth manager
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2017
Transaction ID : 11AI-10241-I
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Earmarked through ACTBLUE. Date recieved by conduit in memo record below.

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

5650.00

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

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

FOR LINE NUMBER: PAGE 9 OF 25
(check only one)

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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR WATERS

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3856.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 28 / 2017

Transaction ID : 11AI-10241-I-MEMO

Amount of Each Receipt this Period
250.00

Memo Item

Total earmarked through conduit, PAC limits not affected.

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-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).....▶	0.00
TOTAL This Period (last page this line number only).....▶	6700.00

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

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

FOR LINE NUMBER: PAGE 10 OF 25
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR WATERS

A. Full Name (Last, First, Middle Initial)
Property Casualty Insurers Association Of America Political Action Committee

Mailing Address 8700 West Bryn Mawr Avenue Ste. 12

City Chicago State IL Zip Code 60631

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2017

Transaction ID : 11C-10238

Amount of Each Receipt this Period
 2500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-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)..... ▶	2500.00
TOTAL This Period (last page this line number only)..... ▶	2500.00

**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 11 OF 25			
	<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)
CITIZENS FOR WATERS

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement
Mailing Address P.O. Box 6463		M M / D D / Y Y Y Y 01 / 17 / 2017
City Carol Stream	State IL	Zip Code 60197-6463
Purpose of Disbursement Phone Bill	001	
Candidate Name		FEC Identification Number C
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) ▼	Amount of Each Disbursement this Period 192.59
State: District:		Transaction ID : 17-5225 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement
Mailing Address P.O. Box 6463		M M / D D / Y Y Y Y 02 / 15 / 2017
City Carol Stream	State IL	Zip Code 60197-6463
Purpose of Disbursement Phone Bill	001	
Candidate Name		FEC Identification Number C
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) ▼	Amount of Each Disbursement this Period 250.19
State: District:		Transaction ID : 17-5248 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement
Mailing Address P.O. Box 6463		M M / D D / Y Y Y Y 03 / 16 / 2017
City Carol Stream	State IL	Zip Code 60197-6463
Purpose of Disbursement Phone Bill	001	
Candidate Name		FEC Identification Number C
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) ▼	Amount of Each Disbursement this Period 431.38
State: District:		Transaction ID : 17-5265 <input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	874.16
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 12 OF 25			
	<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)
CITIZENS FOR WATERS

Full Name (Last, First, Middle Initial) A. GOULD & ORELLANA, LLC			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2017		
Mailing Address 249 E. Ocean Blvd. #685			FEC Identification Number C		
City Long Beach	State CA	Zip Code 90802	Amount of Each Disbursement this Period 399.40		
Purpose of Disbursement Office Expenses		Category/ Type 001	Transaction ID : 17-5229		
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:					

Full Name (Last, First, Middle Initial) B. GOULD & ORELLANA, LLC			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2017		
Mailing Address 249 E. Ocean Blvd. #685			FEC Identification Number C		
City Long Beach	State CA	Zip Code 90802	Amount of Each Disbursement this Period 4412.50		
Purpose of Disbursement PAC Management/Political Reporting Services		Category/ Type 001	Transaction ID : 17-5250		
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:					

Full Name (Last, First, Middle Initial) C. GOULD & ORELLANA, LLC			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2017		
Mailing Address 249 E. Ocean Blvd. #685			FEC Identification Number C		
City Long Beach	State CA	Zip Code 90802	Amount of Each Disbursement this Period 3000.00		
Purpose of Disbursement Prof. Services: Slate Mailer (See AO 2004-37)		Category/ Type 004	Transaction ID : 17-5251		
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	7811.90
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 13 OF 25			
	<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)
CITIZENS FOR WATERS

Full Name (Last, First, Middle Initial) A. Harris & Harris Sound			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2017		
Mailing Address 4312 4th Ave.			FEC Identification Number C		
City Los Angeles	State CA	Zip Code 90008	Amount of Each Disbursement this Period 550.00		
Purpose of Disbursement Sound for District Xmas Party		Category/ Type 007	Transaction ID : 17-5223		
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:					

Full Name (Last, First, Middle Initial) B. Higgs, Xavier, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2017		
Mailing Address 11657 Cetona Way			FEC Identification Number C		
City Porter Ranch	State CA	Zip Code 91326	Amount of Each Disbursement this Period 350.00		
Purpose of Disbursement Speech Writing		Category/ Type 001	Transaction ID : 17-5224		
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:					

Full Name (Last, First, Middle Initial) C. Political Data Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2017		
Mailing Address POBox 59570			FEC Identification Number C		
City Norwalk	State CA	Zip Code 90652	Amount of Each Disbursement this Period 734.07		
Purpose of Disbursement Mail File		Category/ Type 004	Transaction ID : 17-5255		
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	1634.07
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 14 OF 25			
	<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)
CITIZENS FOR WATERS

Full Name (Last, First, Middle Initial) A. Rolla Group LLC			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2017		
Mailing Address 1220 4th Street NW, #1			FEC Identification Number C		
City Washington	State DC	Zip Code 20001	Amount of Each Disbursement this Period 15000.00		
Purpose of Disbursement Fundraiser Management Fee		Category/ Type 003	Transaction ID : 17-5252		
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:					

Full Name (Last, First, Middle Initial) B. Rolla Group LLC			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2017		
Mailing Address 1220 4th Street NW, #1			FEC Identification Number C		
City Washington	State DC	Zip Code 20001	Amount of Each Disbursement this Period 2852.46		
Purpose of Disbursement Fundraiser Management Expenses		Category/ Type 003	Transaction ID : 17-5253		
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:					

Full Name (Last, First, Middle Initial) C. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2017		
Mailing Address P.O. Box 660108			FEC Identification Number C		
City Dallas	State TX	Zip Code 75266-0108	Amount of Each Disbursement this Period 202.05		
Purpose of Disbursement Phone Bill		Category/ Type 001	Transaction ID : 17-5207		
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	18054.51
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 15 OF 25			
	<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)
CITIZENS FOR WATERS

Full Name (Last, First, Middle Initial) A. Verizon Wireless			Date of Disbursement MM / DD / YYYY 02 / 02 / 2017		
Mailing Address P.O. Box 660108			FEC Identification Number C		
City Dallas	State TX	Zip Code 75266-0108	Amount of Each Disbursement this Period 213.05		
Purpose of Disbursement Phone Bill		Category/ Type 001	Transaction ID : 17-5242		
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:					

Full Name (Last, First, Middle Initial) B. Verizon Wireless			Date of Disbursement MM / DD / YYYY 03 / 02 / 2017		
Mailing Address P.O. Box 660108			FEC Identification Number C		
City Dallas	State TX	Zip Code 75266-0108	Amount of Each Disbursement this Period 235.44		
Purpose of Disbursement Phone Bill		Category/ Type 001	Transaction ID : 17-5260		
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:					

Full Name (Last, First, Middle Initial) C. Verizon Wireless			Date of Disbursement MM / DD / YYYY 03 / 29 / 2017		
Mailing Address P.O. Box 660108			FEC Identification Number C		
City Dallas	State TX	Zip Code 75266-0108	Amount of Each Disbursement this Period 202.03		
Purpose of Disbursement Phone Bill		Category/ Type 001	Transaction ID : 17-5269		
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:					

SUBTOTAL of Disbursements This Page (optional).....▶	650.52
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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR WATERS

A. California Bank & Trust

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 30833

City Salt Lake City State UT Zip Code 84130-0833

Purpose of Disbursement
Credit Card Payment

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 04 / 2017

FEC Identification Number
C

Amount of Each Disbursement this Period
8847.60

Transaction ID : 17-3917-W

Memo Item Expenditure purpose details appear in Credit Card Payees reaching

B. California Bank & Trust

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 30833

City Salt Lake City State UT Zip Code 84130-0833

Purpose of Disbursement
Credit Card Payment

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 31 / 2017

FEC Identification Number
C

Amount of Each Disbursement this Period
400.00

Transaction ID : 17-3934-W

Memo Item Expenditure purpose details appear in Credit Card Payees reaching

c. California Bank & Trust

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 30833

City Salt Lake City State UT Zip Code 84130-0833

Purpose of Disbursement
Credit Card Payment

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 02 / 2017

FEC Identification Number
C

Amount of Each Disbursement this Period
1500.00

Transaction ID : 17-3946-W

Memo Item Expenditure purpose details appear in Credit Card Payees reaching

SUBTOTAL of Disbursements This Page (optional).....▶	10747.60
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 17 OF 25	
	<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)
CITIZENS FOR WATERS

Full Name (Last, First, Middle Initial) A. California Bank & Trust		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2017
Mailing Address PO Box 30833		FEC Identification Number C
City Salt Lake City	State UT	Zip Code 84130-0833
Purpose of Disbursement Credit Card Payment		Amount of Each Disbursement this Period 873.40
Candidate Name		Transaction ID : 17-3952-W
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) ▼	<input type="checkbox"/> Memo Item Expenditure purpose details appear in Credit Card Payees reaching
State: District:		

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2017
Mailing Address Los Angeles International Airport		FEC Identification Number C
City Los Angeles	State CA	Zip Code 90045
Purpose of Disbursement Airfare Expense		Amount of Each Disbursement this Period 400.00
Candidate Name		Transaction ID : 17-5239-P
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) ▼	<input checked="" type="checkbox"/> Memo Item Credit card payee, see Schedule D California Bank & Trust
State: District:		

Full Name (Last, First, Middle Initial) c. Hyatt Hotels		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2017
Mailing Address 1000 H St. NW		FEC Identification Number C
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Fundraiser Event		Amount of Each Disbursement this Period 1500.00
Candidate Name		Transaction ID : 17-5257-P
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) ▼	<input checked="" type="checkbox"/> Memo Item Credit card payee, see Schedule D California Bank & Trust
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	873.40
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 18 OF 25	
	<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)
CITIZENS FOR WATERS

Full Name (Last, First, Middle Initial) A. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2017	
Mailing Address Los Angeles International Airport			FEC Identification Number C	
City Los Angeles	State CA	Zip Code 90045	Amount of Each Disbursement this Period 412.20	
Purpose of Disbursement Atlanta-LAX		Category/ Type 002	Transaction ID : 17-5271-P	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit card payee, see Schedule D California Bank & Trust		
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. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2017	
Mailing Address Los Angeles International Airport			FEC Identification Number C	
City Los Angeles	State CA	Zip Code 90045	Amount of Each Disbursement this Period 461.20	
Purpose of Disbursement Atlanta-LAX		Category/ Type 002	Transaction ID : 17-5270-P	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit card payee, see Schedule D California Bank & Trust		
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 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		Category/ Type	Memo Item <input type="checkbox"/>	
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).....▶	0.00
TOTAL This Period (last page this line number only).....▶	40646.16

**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 19 OF 25			
	<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)
CITIZENS FOR WATERS

Full Name (Last, First, Middle Initial) A. Lucier, Bradley, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2017		
Mailing Address 204 E Navajo St			FEC Identification Number C		
City West Lafayette	State IN	Zip Code 47906	Amount of Each Disbursement this Period 20.83		
Purpose of Disbursement Return of 01/15/2017 Contribution		Category/ Type 001	Transaction ID : 20A-5231		
Candidate Name		Memo Item <input type="checkbox"/>			
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 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		Category/ Type	Memo Item <input type="checkbox"/>		
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 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		Category/ Type	Memo Item <input type="checkbox"/>		
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).....▶	20.83
TOTAL This Period (last page this line number only).....▶	20.83

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 20 OF 25	
	<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)
CITIZENS FOR WATERS

Full Name (Last, First, Middle Initial) A. Zimmer for School Board 2017			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2017	
Mailing Address 249 E. Ocean Blvd. Ste. 685			FEC Identification Number C	
City Long Beach	State CA	Zip Code 90802	Amount of Each Disbursement this Period 1100.00	
Purpose of Disbursement Donation		Category/ Type 012	Transaction ID : 21-5261	
Candidate Name Zimmer, Steve, , ,		Memo Item <input type="checkbox"/>		
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 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		Category/ Type	Memo Item <input type="checkbox"/>	
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 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		Category/ Type	Memo Item <input type="checkbox"/>	
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).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	1100.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **CITIZENS FOR WATERS** Transaction ID : **C9-11-LM**

LOAN SOURCE Full Name (Last, First, Middle Initial) African American 2000 and Beyond		<input type="checkbox"/> Memo Item	Election: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2092 W. Jefferson Blvd.			
City Los Angeles	State CA	ZIP Code 90018	<input type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 25000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25000.00
-------------------------------------	------------------------------------	---

TERMS	Date Incurred M 08 / D 12 / Y 2008	Date Due M 08 / D 12 / Y 2009	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: []

SUBTOTALS This Period This Page (optional).....▶	25000.00
TOTALS This Period (last page in this line only).....▶	25000.00

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
CITIZENS FOR WATERS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Airlines			Nature of Debt (Purpose): Travel Expenses
Mailing Address Los Angeles International Airport			
City Los Angeles	State CA	Zip Code 90045	

Outstanding Balance Beginning This Period 719.60		Transaction ID : D10-875-V	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 719.60	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor David Gould Company			Nature of Debt (Purpose): Professional Services: Slate Mailer (See AO 2004-37)
Mailing Address 249 E. Ocean Blvd., #685			
City Long Beach	State CA	Zip Code 90802	

Outstanding Balance Beginning This Period 1000.00		Transaction ID : D10-2658-V	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GOULD & ORELLANA, LLC			Nature of Debt (Purpose): Office Expenses
Mailing Address 249 E. Ocean Blvd. #685			
City Long Beach	State CA	Zip Code 90802	

Outstanding Balance Beginning This Period 12811.90		Transaction ID : D10-8203-V	
Amount Incurred This Period 6182.26	Payment This Period 7811.90	Outstanding Balance at Close of This Period 11182.26	

1) SUBTOTALS This Period This Page (optional)	▶	12901.86
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
CITIZENS FOR WATERS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Harris & Harris Sound			Nature of Debt (Purpose): Sound for District Xmas Party
Mailing Address 4312 4th Ave.			
City Los Angeles	State CA	Zip Code 90008	

Outstanding Balance Beginning This Period 600.00	Transaction ID : D10-1694-V	
Amount Incurred This Period 0.00	Payment This Period 550.00	Outstanding Balance at Close of This Period 50.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor L.A. Business Printing			Nature of Debt (Purpose): Holiday Cards
Mailing Address 6840 S. La Cienega Blvd. Inglewood			
City Inglewood	State CA	Zip Code 90302	

Outstanding Balance Beginning This Period 246.38	Transaction ID : D10-8213-V	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 246.38

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rolla Group LLC			Nature of Debt (Purpose): Fundraiser Management Fee August
Mailing Address 1220 4th Street NW, #1			
City Washington	State DC	Zip Code 20001	

Outstanding Balance Beginning This Period 17852.46	Transaction ID : D10-6933-V	
Amount Incurred This Period 1283.34	Payment This Period 17852.46	Outstanding Balance at Close of This Period 1283.34

1) SUBTOTALS This Period This Page (optional)	▶	1579.72
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
CITIZENS FOR WATERS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Waters, Karen, , ,			Nature of Debt (Purpose): Prof. Services: Slate Mailer (See AO 2004-37)
Mailing Address 249 E. Ocean Blvd. #685			
City Long Beach	State CA	Zip Code 90802	

Outstanding Balance Beginning This Period 107862.00	Transaction ID : D10-1148-V	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 107862.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express			Nature of Debt (Purpose): Various credit card purchases. Purpose appears/appeared on Schedule B Credit Card Payee memo records
Mailing Address Box 0001			
City Los Angeles	State CA	Zip Code 90096-0001	

Outstanding Balance Beginning This Period 6761.71	Transaction ID : D10-1886-W	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6761.71

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor California Bank & Trust			Nature of Debt (Purpose): Various credit card purchases. Purpose appears/appeared on Schedule B Credit Card Payee memo records
Mailing Address PO Box 30833			
City Salt Lake City	State UT	Zip Code 84130-0833	

Outstanding Balance Beginning This Period 11702.19	Transaction ID : D10-1695-W	
Amount Incurred This Period 2773.40	Payment This Period 11621.00	Outstanding Balance at Close of This Period 2854.59

1) SUBTOTALS This Period This Page (optional)	▶	117478.30
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
CITIZENS FOR WATERS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Congressional FCU Visa			Nature of Debt (Purpose): Various credit card purchases. Purpose appears/appeared on Schedule B Credit Card Payee memo records
Mailing Address PO Box 96099			
City Charlotte	State NC	Zip Code 28296-0099	

Outstanding Balance Beginning This Period 3506.38		Transaction ID : D10-3224-W	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3506.38	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) SUBTOTALS This Period This Page (optional)	▶	3506.38
2) TOTALS This Period (last page this line number only)	▶	135466.26
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	135466.26