

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

Check if different than previously reported. (ACC)

La Mesa

CA

91942-6719

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00670489

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

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

04 / 01 / 2019

through

M M / D D / Y Y Y Y

06 / 30 / 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

Baber, William, R., ,

Signature of Treasurer

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07 / 15 / 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.

Office Use Only

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)).... | 31850.00 | 39610.00 |
| (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))..... | 31850.00 | 39610.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 10903.99 | 13479.32 |
| (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))..... | 10903.99 | 13479.32 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 32545.49 | |
| 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)..... | 29950.00 | 37650.00 |
| (ii) Unitemized..... | 1900.00 | 1960.00 |
| (iii) TOTAL of contributions from individuals ▶ | 31850.00 | 39610.00 |
| (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)).. | 31850.00 | 39610.00 |
| 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)..... ▶ | 31850.00 | 39610.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 10903.99 | 13479.32 |
| 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 | 0.00 | 250.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 10903.99 | 13729.32 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 11599.48 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 31850.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 43449.48 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 10903.99 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 32545.49 |

**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 18
(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)
Mayor Bill Wells for Congress

A. Full Name (Last, First, Middle Initial)
Allose, Basmal, , ,

Mailing Address 1090 W. Main Street

City El Cajon State CA Zip Code 92020-3124

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

Name of Employer American Ice - Super Star Occupation Owner

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
06 / 26 / 2019

Transaction ID : **A328DDA029FB74D74969**

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 5360 Jackson Drive #216

City La Mesa State CA Zip Code 91942-6004

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

Name of Employer AIC Inc. Occupation Real Estate

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 06 / 2019

Transaction ID : **A1BD9039D211640DEA0C**

Amount of Each Receipt this Period
250.00

Memo Item

C. 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 ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 24 / 2019

Transaction ID : **A02C9A4CAAD094DA8983**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 18 | |
| | <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)
Ben-Moshe, Eli, ,

Mailing Address 5342 Caminito Vista Lujo

| | | |
|-------------------|-------------|-------------------|
| City San Diego | State CA | Zip Code 92130 |
|-------------------|-------------|-------------------|

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

| | |
|-----------------------------------|---------------------------|
| Name of Employer Self Employed | Occupation Optometrist |
|-----------------------------------|---------------------------|

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2019

Transaction ID : A261065206AFA41F48B3

Amount of Each Receipt this Period
1800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Feldman, Albert, L., ,

Mailing Address 7835 Rush Rose Dr.
APT 111

| | | |
|------------------|-------------|------------------------|
| City Carlsbad | State CA | Zip Code 92009-6828 |
|------------------|-------------|------------------------|

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
 06 / 17 / 2019

Transaction ID : AAA07F88D4B9E4739B06

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 1658 Gailles Blvd. Suite B

| | | |
|-------------------|-------------|-------------------|
| City San Diego | State CA | Zip Code 92154 |
|-------------------|-------------|-------------------|

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

| | |
|-------------------------|--------------------|
| Name of Employer BBG | Occupation Exec |
|-------------------------|--------------------|

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
 06 / 28 / 2019

Transaction ID : A0F17EF70EA2B4081A1E

Amount of Each Receipt this Period
2000.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 4800.00 |
| 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 7 OF 18 | |
| | <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)
George, Christopher, , ,

Mailing Address 308 Vista Abierta

| | | |
|------------------|-------------|-------------------|
| City El Cajon | State CA | Zip Code 92020 |
|------------------|-------------|-------------------|

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

| | |
|--|---------------------------------|
| Name of Employer Team Kia-Mazda of El Cajon | Occupation Retail Automotive |
|--|---------------------------------|

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
 05 / 22 / 2019

Transaction ID : A126815BCCD5A40BE8F2

Amount of Each Receipt this Period
1000.00

Memo Item

B. 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 ▼
2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : AE66AFC0C5FAE45B394E

Amount of Each Receipt this Period
1800.00

Memo Item

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

Mailing Address 1501 Avocado Ave.

| | | |
|------------------|-------------|------------------------|
| City El Cajon | State CA | Zip Code 92020-7710 |
|------------------|-------------|------------------------|

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

| | |
|--------------------------------|---------------------|
| Name of Employer Quick Trip | Occupation Owner |
|--------------------------------|---------------------|

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2019

Transaction ID : A56629B3B830743C0B1F

Amount of Each Receipt this Period
300.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 3100.00 |
| 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 18
(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)
Hani Toma, Allen, , ,

Mailing Address 462 Skywood Drive

City El Cajon State CA Zip Code 92020

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

Name of Employer Moonlight Liquor Occupation Sales Associate

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 27 / 2019

Transaction ID : **AE962F077ED204BC18A9**

Amount of Each Receipt this Period
2800.00

Memo Item

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

Mailing Address 1310 Vista Del Monte Drive

City El Cajon State CA Zip Code 92020

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

Name of Employer Hirmez Brothers Occupation Owner

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 28 / 2019

Transaction ID : **A54F7AB6DB6BD4E00996**

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1651 E Main St.

City El Casjon State CA Zip Code 92021

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

Name of Employer Bright Star Care Occupation Owner

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 15 / 2019

Transaction ID : **AF4C773EFACD54CF3A7B**

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5850.00

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 9 OF 18
(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)
Malcolm, David, , ,

Mailing Address 700 Front Street

City San Diego State CA Zip Code 92101

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

Name of Employer CalWest Occupation Real Estate

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
06 / 27 / 2019

Transaction ID : A862BADAB70874A03835

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1455 Fuentes Heights Lane

City El Cajon State CA Zip Code 92019-3774

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

Name of Employer Ace Hardware Pacific Beach Occupation Owner

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 27 / 2019

Transaction ID : AC6A22BB7B25C40D5BE9

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 8527 Sugarman Drive

City La Jolla State CA Zip Code 92037

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 ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 24 / 2019

Transaction ID : A4514227153914787A35

Amount of Each Receipt this Period
250.00

Memo Item

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

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

1000.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 18
(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)
Stephan, Faris, , ,

Mailing Address 360 W. Lexington
Suite 100

City El Cajon State CA Zip Code 92020-4414

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

Name of Employer I2 Realty Occupation Real Estate Broker

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
06 / 26 / 2019

Transaction ID : **AEA1653BB2B464DCD956**

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 462 Skywood Drive

City El Cajon State CA Zip Code 92020

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

Name of Employer Sharp Healthcare Occupation Admissions

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 27 / 2019

Transaction ID : **A2ECA87B7C1FD4B9CA12**

Amount of Each Receipt this Period
2800.00

Memo Item

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

Mailing Address 5055 Federal Boulevard

City San Diego State CA Zip Code 92102

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

Name of Employer Par Liquor Occupation Stock Associate

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 27 / 2019

Transaction ID : **A7AE0C328AD634D9BB94**

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 6600.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 18
(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)
Williford, Douglas, , ,

Mailing Address 555 Alpine Trail Road

City Alpine State CA Zip Code 91901-2858

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 ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2019

Transaction ID : **AF90FA1FF8A654AB8894**

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 2213 Pointe Parkway

City Spring Valley State CA Zip Code 91978

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

Name of Employer Nation Wide Transport Solutions Occupation Owner

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2019

Transaction ID : **A256065460CE94765B94**

Amount of Each Receipt this Period
2800.00

Memo Item

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

Mailing Address 10451 Harvest View Way

City San Diego State CA Zip Code 92128

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

Name of Employer East County Mortuary Occupation Funeral Director

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2019

Transaction ID : **A80AB819C49454340B22**

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5850.00

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 12 OF 18
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

A. Full Name (Last, First, Middle Initial)
Zavaro, Suhail, , ,

Mailing Address 1994 Via Casa Alta

City: La Jolla State: CA Zip Code: 92037-5730

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

Name of Employer: Zavaro Cardiovascular Inst. Occupation: Physician

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
 05 / 24 / 2019

Transaction ID : **A0E65658230CD4E11AA5**

Amount of Each Receipt this Period
 1000.00

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).....▶ | 1000.00 |
| TOTAL This Period (last page this line number only).....▶ | 29950.00 |

**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 18 | |
| | <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. Aristotle | | Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2019 |
| Mailing Address 205 Pennsylvania Ave, SE | | FEC Identification Number C |
| City Washington | State DC | Zip Code 20003-1164 |
| Purpose of Disbursement filing software | | Amount of Each Disbursement this Period 1900.00 |
| Candidate Name | | Transaction ID : B5DA646FDE85E4BD4AFA |
| 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 04 / 01 / 2019 |
| Mailing Address 7918 El Cajon Blvd. #N-162 | | FEC Identification Number C |
| City La Mesa | State CA | Zip Code 91942-6719 |
| Purpose of Disbursement Treasurer | | Amount of Each Disbursement this Period 500.00 |
| Candidate Name | | Transaction ID : B119BEEED0B0164D33AD1 |
| 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 05 / 01 / 2019 |
| Mailing Address 7918 El Cajon Blvd. #N-162 | | FEC Identification Number C |
| City La Mesa | State CA | Zip Code 91942-6719 |
| Purpose of Disbursement Treasurer | | Amount of Each Disbursement this Period 500.00 |
| Candidate Name | | Transaction ID : BE671352B912648948F8 |
| 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: | | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2900.00 |
| 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 14 OF 18 | |
| | <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 05 / 17 / 2019 |
| Mailing Address 7918 El Cajon Blvd. #N-162 | | FEC Identification Number C |
| City La Mesa | State CA | Zip Code 91942-6719 |
| Purpose of Disbursement Treasurer | Candidate Name | Amount of Each Disbursement this Period 1200.00 |
| 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) ▼ | Transaction ID : B679987F3D3264C72990 |
| State: District: | Category/Type | <input type="checkbox"/> Memo Item |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Baber, William, R., , | | Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2019 |
| Mailing Address 7918 El Cajon Blvd. #N-162 | | FEC Identification Number C |
| City La Mesa | State CA | Zip Code 91942-6719 |
| Purpose of Disbursement Treasurer | Candidate Name | Amount of Each Disbursement this Period 500.00 |
| 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) ▼ | Transaction ID : BD4E16C447783429D8DA |
| State: District: | Category/Type | <input type="checkbox"/> Memo Item |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Baber, William, R., , | | Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2019 |
| Mailing Address 7918 El Cajon Blvd. #N-162 | | FEC Identification Number C |
| City La Mesa | State CA | Zip Code 91942-6719 |
| Purpose of Disbursement Treasurer | Candidate Name | Amount of Each Disbursement this Period 500.00 |
| 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) ▼ | Transaction ID : B26F75D1613BE4C8FB33 |
| State: District: | Category/Type | <input type="checkbox"/> Memo Item |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 2200.00 |
| 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 15 OF 18 | |
| | <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. Capital Development Strategies | | Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2019 |
| Mailing Address 1127 - 11th Street Suite 310 | | FEC Identification Number C |
| City Sacramento | State CA | Zip Code 95814-3809 |
| Purpose of Disbursement Fundraising commission + costs | Category/Type 003 | |
| Candidate Name | Amount of Each Disbursement this Period 1817.93 | |
| 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) ▼ | Transaction ID : B3C62D78F0B9242B4941 |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. DLX for Business | | Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2019 |
| Mailing Address 3680 Victoria St N. | | FEC Identification Number C |
| City Shoreview | State MN | Zip Code 55126-2906 |
| Purpose of Disbursement check printing | Category/Type 001 | |
| Candidate Name | Amount of Each Disbursement this Period 228.96 | |
| 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) ▼ | Transaction ID : B21F11C842D724797A08 |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Efundraising | | Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2019 |
| Mailing Address 2831 G St Steeet #120 | | FEC Identification Number C |
| City Sacramento | State CA | Zip Code 95816-3783 |
| Purpose of Disbursement Credit Card Fee | Category/Type 003 | |
| Candidate Name | Amount of Each Disbursement this Period 140.00 | |
| 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) ▼ | Transaction ID : BE5109825305A4252A4D |
| State: District: | <input type="checkbox"/> Memo Item | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2186.89 |
| 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 16 OF 18 | | | |
| | <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. Efundraising | | | Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 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 342.50 | | |
| Purpose of Disbursement Credit Card Fee | | Category/Type 003 | Transaction ID : B884920B60C1549EF890 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| 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 06 / 21 / 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 180.00 | | |
| Purpose of Disbursement Credit Card Fee | | Category/Type 003 | Transaction ID : B72492767064E4154B90 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| 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 06 / 30 / 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 615.00 | | |
| Purpose of Disbursement Credit Card Fee | | Category/Type 003 | Transaction ID : B30BB6DB1D4AC4B3DAAA | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| 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: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 1137.50 |
| 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 18 | | | |
| | <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. Minuteman Press | | Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2019 |
| Mailing Address 3175 Midway Drive #J | | FEC Identification Number C |
| City San Diego | State CA | Zip Code 92110-4543 |
| Purpose of Disbursement Palm cards | | Amount of Each Disbursement this Period 344.40 |
| Candidate Name | Category/ Type 004 | Transaction ID : BB20BEED5352048269A1 |
| 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. Minuteman Press | | Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2019 |
| Mailing Address 3175 Midway Drive #J | | FEC Identification Number C |
| City San Diego | State CA | Zip Code 92110-4543 |
| Purpose of Disbursement Palm cards tax | | Amount of Each Disbursement this Period 26.69 |
| Candidate Name | Category/ Type 004 | Transaction ID : BF92C2704AD104E419D0 |
| 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. Naumann Consulting | | Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2019 |
| Mailing Address 402 S. 2nd Avenue | | FEC Identification Number C |
| City Brighton | State CO | Zip Code 80601-2006 |
| Purpose of Disbursement design work | | Amount of Each Disbursement this Period 250.00 |
| Candidate Name | Category/ Type 004 | Transaction ID : BB44EA353BC944A4C9D9 |
| 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: | | |

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|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 621.09 |
| 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 18 | |
| | <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. Sheraton Hotel | | | Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2019 | |
| Mailing Address 1201 K Street NW | | | FEC Identification Number C | |
| City Washington | State DC | Zip Code 20005-4011 | Amount of Each Disbursement this Period 860.61 | |
| Purpose of Disbursement Candidate DC trip | | Category/ Type 002 | Transaction ID : B7D83AF9C2DAE42B3BA4 | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| 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. Southwest Airlines | | | Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2019 | |
| Mailing Address 2702 Love Field Drive | | | FEC Identification Number C | |
| City Dallas | State TX | Zip Code 75235-1908 | Amount of Each Disbursement this Period 397.00 | |
| Purpose of Disbursement Candidate trip to DC | | Category/ Type 002 | Transaction ID : B3BA781862E9C4008AB7 | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| 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. Weebly.com | | | Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2019 | |
| Mailing Address 564 Pacific Ave. | | | FEC Identification Number C | |
| City San Francisco | State CA | Zip Code 94133-4608 | Amount of Each Disbursement this Period 364.00 | |
| Purpose of Disbursement Website | | Category/ Type | Transaction ID : B279EE0B7E18A4DEF8DB | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| 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: | | | | |

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|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1621.61 |
| TOTAL This Period (last page this line number only).....▶ | 10667.09 |