

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) 249 E. Ocean Blvd., #670

Check if different than previously reported. (ACC)

Long Beach

CA

90802

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 MM / DD / YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY through MM / DD / YYYY
04 / 01 / 2019 through 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.

Type or Print Name of Treasurer Crummitt, Gary, , ,

Signature of Treasurer Crummitt, Gary, , ,

[Electronically Filed]

Date MM / DD / YYYY
10 / 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								
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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)	7102.52	10187.02
(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)).....	7102.52	10187.02
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

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.....	7102.52	10187.02
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	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	3801.47	4311.30
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	10903.99	14498.32

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

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

Form/Schedule: F3A
Transaction ID :

Amending Expnditures Columns A & B

Form/Schedule:
Transaction ID:

**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 19
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 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
------------------	-------------	-------------------

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 : INCA48

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
-----------------	-------------	-------------------

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 : INCA44

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
------------------	-------------	-------------------

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 : INCA61

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 7 OF 19	
	<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 : INCA58

Amount of Each Receipt this Period
1800.00

Memo Item

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

Mailing Address 7835 Rush Rose Dr.
APT 111

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

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 : INCA54

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 : INCA59

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: PAGE 8 OF 19
(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)
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 : **INCA56**

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

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 : **INCA72**

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

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 : **INCA45**

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: (check only one)		PAGE 9 OF 19	
	<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)
Hani Toma, Allen, , ,

Mailing Address 462 Skywood Drive

City El Cajon	State CA	Zip Code 92020
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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 : INCA66

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 : INCA40

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 : INCA69

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 10 OF 19
(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 : INCA47

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

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 : INCA41

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 : INCA42

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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 11 OF 19	
	<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)
Stephan, Faris, , ,

Mailing Address 360 W. Lexington
Suite 100

City El Cajon State CA Zip Code 92020

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 : INCA53

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 : INCA67

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 : INCA68

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 19
(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)
Williford, Douglas, , ,

Mailing Address 555 Alpine Trail Road

City: Alpine State: CA Zip Code: 91901

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: 05 / 13 / 2019

Transaction ID : **INCA43**

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: 05 / 09 / 2019

Transaction ID : **INCA71**

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: 05 / 09 / 2019

Transaction ID : **INCA70**

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 13 OF 19
(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

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 : INCA55

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 14 OF 19			
	<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			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	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement		Category/ Type 001	Transaction ID : EXPB194		
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. Baber, William			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	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement		Category/ Type 001	Transaction ID : EXPB195		
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. Baber, William			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	Amount of Each Disbursement this Period 1200.00		
Purpose of Disbursement		Category/ Type 001	Transaction ID : EXPB196		
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:					

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 19			
	<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			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	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement		Category/ Type 001	Transaction ID : EXPB197		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Baber, William			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2019		
Mailing Address 7918 El Cajon Blvd. #N-162			FEC Identification Number C		
City La Mesa	State CA	Zip Code 91942	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement		Category/ Type 001	Transaction ID : EXPB198		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. 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	Amount of Each Disbursement this Period 1817.93		
Purpose of Disbursement		Category/ Type 001	Transaction ID : EXPB205		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2817.93
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 19			
	<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
Mailing Address 2831 G St Steet #120		M M / D D / Y Y Y Y 05 / 17 / 2019
City Sacramento	State CA	Zip Code 95816
Purpose of Disbursement		FEC Identification Number C
Candidate Name	Category/Type 001	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 : EXPB199
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Efundraising		Date of Disbursement
Mailing Address 2831 G St Steet #120		M M / D D / Y Y Y Y 05 / 22 / 2019
City Sacramento	State CA	Zip Code 95816
Purpose of Disbursement		FEC Identification Number C
Candidate Name	Category/Type 001	Amount of Each Disbursement this Period 342.50
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 : EXPB200
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Efundraising		Date of Disbursement
Mailing Address 2831 G St Steet #120		M M / D D / Y Y Y Y 06 / 21 / 2019
City Sacramento	State CA	Zip Code 95816
Purpose of Disbursement		FEC Identification Number C
Candidate Name	Category/Type 001	Amount of Each Disbursement this Period 180.00
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 : EXPB204
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	662.50
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 19			
	<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 06 / 30 / 2019
Mailing Address 2831 G St Steet #120		FEC Identification Number C
City Sacramento	State CA	Zip Code 95816
Purpose of Disbursement		Amount of Each Disbursement this Period 615.00
Candidate Name	Category/Type 001	Transaction ID : EXPB207
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 / 18 / 2019
Mailing Address 3175 Midway Drive #J		FEC Identification Number C
City San Diego	State CA	Zip Code 92110
Purpose of Disbursement		Amount of Each Disbursement this Period 344.40
Candidate Name	Category/Type 003	Transaction ID : EXPB202
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. 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
Purpose of Disbursement		Amount of Each Disbursement this Period 364.00
Candidate Name	Category/Type 001	Transaction ID : EXPB201
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1323.40
TOTAL This Period (last page this line number only).....▶	7003.83

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

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

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
Purpose of Disbursement		Amount of Each Disbursement this Period 1900.00
Candidate Name	Category/ Type	Transaction ID : EXPB139
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. 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
Purpose of Disbursement		Amount of Each Disbursement this Period 228.96
Candidate Name	Category/ Type	Transaction ID : EXPB148
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. 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
Purpose of Disbursement		Amount of Each Disbursement this Period 26.69
Candidate Name	Category/ Type	Transaction ID : EXPB144
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2155.65
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 19 OF 19	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. 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	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement			Transaction ID : EXPB145	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. 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	Amount of Each Disbursement this Period 860.61	
Purpose of Disbursement			Transaction ID : EXPB140	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. 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	Amount of Each Disbursement this Period 397.00	
Purpose of Disbursement			Transaction ID : EXPB143	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1507.61
TOTAL This Period (last page this line number only).....▶	3663.26