Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on	20103	329				port ed B		CA	NDII	DATE		COM	1ITTEE	✓ [LOB	BYIST		
Name of Filing C	committe	e, Candida	ate or Lo	obbyist:		Cab	ot O	il & G	Sas Co	orpo	ration	Polit	ical Act	ion Com	mittee				
Street Address:																			
City:	Hous	ton							State	e:	TX			Zip Cod	le: 77	024			
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	AY PRE	; -	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	N	0	\
(place X to the right of	6TH TUES		4.	2ND FRIDA ELECTION		E	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	N	0	√
report type)	ANNUAL	REPORT	7. X	Year 2016	5				NG ME					PAPER		\	DISK	ETTE	
Name of Office S	ought by	Candidat	e:						DAT	E O	F ELE	CTIC	ON	District Number	Office Code	Pa	rty Code	Cour	
									МО		DAY	Y	EAR						
										11		8	2016		(SEE IN	STRUCT	IONS FOR	CODES)
Summary of Expenditures		and	МО	DAY	YEAR		_		МО		DAY	Y	EAR	FO	R OFFIC	E USI	ONLY		
Expenditures			1	11 29	9 2	016	Т	<u>о</u>		12		31	2016						
A. Amount Bro	ught Forv	ward From	ı Last R	eport				\$				20,	850.00						
B. Total Moneta	ary Contr	ibutions A	and Rec	eipts (Fro	m Sche	dule	: I)	\$					0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				20,	850.00						
D. Total Expend	ditures (I	From Sche	dule II	I)				\$					0.00						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$				20,8	350.00						
F. Value Of In-	Kind Con	tributions	Receive	ed (From s	Schedu	le II	:)	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule I	V)			\$					0.00			•			
					AFF	FID/	١٧٢	T SE	CTI	NC									
PART I - If this is	s a Comm	ittee repo	ort, trea	surer sign	here.	If th	is is	a Car	ndidat	e re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and complete		report, incl	uding the	attached s	chedule	s file	d on	paper	or by e	electr	ronic m	edium	, are to t	he best o	f my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	cribed befo	ore me this		20						•		:	Signature	of Perso	n Submitt	ing Re	port		_
	_	Signatur	'e					-						Prin	ted Name	1			_
My Commission Ex	cpires									•				Emai	il				-
		мо	D/	ΑY	YR						Are	ea Co	de	Daytim	e Teleph	one N	ımber		
Part II- If this is	a report	of a cand	idate's	authorize	d Comr	nitte	e, C	andid	ate sl	nalls	sign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and be	lief this	polit	tical	comm	ittee h	as no	ot viola	ted ar	ny provis	ions of the	e act of Ju	ıne 3,1	.937 (P.	L. 133	3,
Sworn to and subsc		re me this											s	ignature o	of Candida	ate			-
	day of —							-						Printe	d Name				-
	:	Signature						-											_
My Commission Exp		-												Ema	il				
	_	МО	D	AY	YR	ł		•			Area	Code		Da	ytime To	elepho	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -	-			
Name of Filing Committee or Candidate	Reporting	g Period		
Cabot Oil & Gas Corporation Political Action Committee	From:	11/29/201	<u>.6</u> To:	<u>12/31/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
			1	
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa	d enter am ge, Item B.	ount)	\$	0.00

PAGE TOTAL

0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candida	te		Reporting Period				
			From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address	_	_				\$	0.00
City	State	Zip Code (Plus 4)					

etailed Summary Page, Section 2. \$

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Comm	ittee or Candidate	Re	eporting F	Period			
		Fr	rom:		To) :	
		'		DATE			AMOUNT
Full Name of Contributo	pr		мо	DAY	YEAR		
Mailing Address						\$	0.00
		7in Code (Dive 4)	1	1	İ		
City	State	Zip Code (Plus 4)					
City	State	Zip Code (Plus 4)					PAGE TOTAL

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Cai	Reporting	Period						
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d Summary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate				orting Pe	riod			
From						Т	o:	
	D/		AMOUNT					
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus	5 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip	Code (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00
							7	0.00

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee	Name of Filing Committee or Candidate				od				
			From:			To:			
				E	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	us 4)						
Receipt Description	'								
Futor Count Total of Dout	Fan Cahadula I Datailad	I Commence Dance C	` !	4			ı	PAGE TOTAL	
Enter Grand Total of Part	e on Schedule 1, Detailed	i Summary Page, S	ection	4.			\$	0.00	

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od	
Cabot Oil & Gas Corporation Political Action Committee	From:	<u>11/29/2016</u> To:	<u>12/31/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR	ł .	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting							
	From:							
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				 		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•	•		•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					porting	Period			
Fr					m:		То:		
	DATE								AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State Zip Code(Plus 4) Description of Control				of Contribution	
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
	From			То:			
				DATE			AMOUNT
To Whom Paid				DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
Enter Crand Total of Evnanditures	on Dogg 1 Donowh (Cover Dage Item F					PAGE TOTAL
Enter Grand Total of Expenditures	on Page 1, Report C	Lover Faye, Item L	, .			\$	0.00