

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

SHERIFF SCOTT JONES FOR CONGRESS

ADDRESS (number and street) 2150 RIVER PLAZA DR. #150

Check if different than previously reported. (ACC)

SACRAMENTO

CA

95833

2. **FEC IDENTIFICATION NUMBER** ▼

C C00592113

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA

07

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 / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 David Bauer

Signature of Treasurer David Bauer

[Electronically Filed]

Date

/ /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

SHERIFF SCOTT JONES 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))....	182038.56	327708.56
(b) Total Contribution Refunds (from Line 20(d))	1000.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	181038.56	326708.56
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	107947.14	116549.30
(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)).....	107947.14	116549.30
8. Cash on Hand at Close of Reporting Period (from Line 27).....	210159.26	
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).....	11264.19	

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 12/2003)

Write or Type Committee Name

SHERIFF SCOTT JONES 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).....	131646.69	268596.69
(ii) Unitemized.....	22088.00	30808.00
(iii) TOTAL of contributions from individuals ▶	153734.69	299404.69
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	28303.87	28303.87
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	182038.56	327708.56
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)..... ▶	182038.56	327708.56

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	107947.14	116549.30
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	1000.00	1000.00
(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)).....	1000.00	1000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	108947.14	117549.30

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	137067.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	182038.56
25. SUBTOTAL (add Line 23 and Line 24).....	319106.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	108947.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	210159.26

**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 5 OF 126
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Corrick

Mailing Address 4005 Cayente Way

City Sacramento	State CA	Zip Code 95864
--------------------	-------------	-------------------

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

Name of Employer Nacht & Lewis Architects	Occupation Architect
--	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 04 / 2016

Transaction ID : INCA387

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1230 45th St.

City SACRAMENTO	State CA	Zip Code 95819
--------------------	-------------	-------------------

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

Name of Employer Self	Occupation Real estate
--------------------------	---------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 04 / 2016

Transaction ID : INCA340

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address P.O. Box 175

City West Sacramento	State CA	Zip Code 95691
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation Not employed
-------------------------	----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2016

Transaction ID : INCA429

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

1750.00

**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 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Denis White

Mailing Address 901 H Street #101

City Sacramento State CA Zip Code 95814

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 06 / 2016

Transaction ID : INCA408

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 4900 Natomas Blvd #322

City Sacramento State CA Zip Code 95835

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

Name of Employer Mastagni Holstedt, APC Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 07 / 2016

Transaction ID : INCA449

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Ryan O'Brien

Mailing Address P.O. Box 1837

City FAIR OAKS State CA Zip Code 95628

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

Name of Employer n/a Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 07 / 2016

Transaction ID : INCA428

Amount of Each Receipt this Period
25.00

Memo Item

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

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

725.00

**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 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Linda Smolich

Mailing Address 3140 J St.

City State Zip Code
SACRAMENTO CA 95816

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

Name of Employer Occupation
Lincoln Law School Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 07 / 2016

Transaction ID : INCA450

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 10551 W. STOCKTON BLVD

City State Zip Code
ELK GROVE CA 95757

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

Name of Employer Occupation
ELK GROVE MILLING, INC PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 08 / 2016

Transaction ID : INCA438

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 5112 Madison Avenue suite 201

City State Zip Code
Sacramento CA 95841

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

Name of Employer Occupation
RPM Automotive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 09 / 2016

Transaction ID : INCA432

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

2000.00

**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 8 OF 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Patrick Frink		Date of Receipt M M / D D / Y Y Y Y 01 / 09 / 2016	
Mailing Address 5112 Madison Ave. #201		Transaction ID : INCA467	
City SACRAMENTO	State CA	Zip Code 95841	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer RPM	Occupation Auto sales		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Marcia Courson		Date of Receipt M M / D D / Y Y Y Y 01 / 11 / 2016	
Mailing Address 15037 Fuente De Paz		Transaction ID : INCA468	
City RANCHO MURIETA	State CA	Zip Code 95683	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer n/a	Occupation Not employed		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Rodney Metzler		Date of Receipt M M / D D / Y Y Y Y 01 / 11 / 2016	
Mailing Address 15168 De La Cruz Dr.		Transaction ID : INCA455	
City Rancho Murieta	State CA	Zip Code 95683	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Empire Golf, Inc.	Occupation Golf Course Management		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	2250.00

**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 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Corrick

Mailing Address 4005 Cayente Way

City Sacramento State CA Zip Code 95864

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

Name of Employer Nacht & Lewis Architects Occupation Architect

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 12 / 2016

Transaction ID : INCA470

Amount of Each Receipt this Period
1350.00

Memo Item

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

Mailing Address 3337 Saxonville Way

City Antelope State CA Zip Code 95843

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

Name of Employer Word & Brown Companies OC Occupation National Benefit Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1950.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 12 / 2016

Transaction ID : INCA471

Amount of Each Receipt this Period
1350.00

Memo Item

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

Mailing Address 8940 Mackey Road

City Elk Grove State CA Zip Code 95624

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

Name of Employer Colliers Occupation Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 14 / 2016

Transaction ID : INCA459

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).....

2950.00

**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 10 OF 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. H. Joseph Perrin		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 14 / 2016	
Mailing Address 7407 Pocket Rd.		Transaction ID : INCA481	
City Sacramento	State CA	Amount of Each Receipt this Period 200.00	
Zip Code 95831		<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			
Name of Employer n/a	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.00		

Full Name (Last, First, Middle Initial) B. Maxwell Ramsey		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 16 / 2016	
Mailing Address 6620 Jarrett Court		Transaction ID : INCA525	
City Elk Grove	State CA	Amount of Each Receipt this Period 1000.00	
Zip Code 95757		<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Contract writer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) C. Marilyn Smolich		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 18 / 2016	
Mailing Address 4731 Chancery Way		Transaction ID : INCA486	
City Carmichael	State CA	Amount of Each Receipt this Period 2000.00	
Zip Code 95608		<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			
Name of Employer Lincoln Law School	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2400.00		

SUBTOTAL of Receipts This Page (optional).....	3200.00
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 11 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Johnny Zamrzla

Mailing Address 2229 East Avenue Q

City Palmdale State CA Zip Code 93550

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

Name of Employer Western Pacific Occupation roofing & sheetmetal contractors

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2016

Transaction ID : INCA466

Amount of Each Receipt this Period
 _____ 225.00

Memo Item

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

Mailing Address 12155 Tributary Pt. Dr. 155

City GOLD RIVER State CA Zip Code 95670

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

Name of Employer Sacramento Credit Union Occupation Pres.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 19 / 2016

Transaction ID : INCA478

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

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

Mailing Address 6620 Jarrett Court

City Elk Grove State CA Zip Code 95757

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

Name of Employer Self Occupation Contract writer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2016

Transaction ID : INCA464

Amount of Each Receipt this Period
 _____ 350.00

Memo Item

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

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

_____ 1075.00

**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 12 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Martin Vanich

Mailing Address 2829 Juniper Lane

City Sacramento State CA Zip Code 95825

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

Name of Employer Marty Vanich Automotive Repair Occupation Auto repairs

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2016

Transaction ID : INCA523

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 540 Fulton Ave.

City SACRAMENTO State CA Zip Code 95825

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

Name of Employer Peter Bollinger Investment Co. Occupation Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2016

Transaction ID : INCA502

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3620 American River Dr., #230.,

City Sacramento State CA Zip Code 95864

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

Name of Employer Longyear, O'Dea & Lavra Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : INCA526

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1750.00

**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 13 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Van Longyear		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 22 / 2016	
Mailing Address 3620 American River Drive, #230		Transaction ID : INCA496	
City Sacramento	State CA	Zip Code 95864	Amount of Each Receipt this Period _____ 500.00 <input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee.		C	
Name of Employer Longyear, O'Dea & Lavra, LLP	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) B. Jesse Ortiz		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 22 / 2016	
Mailing Address 980 9th Street, Suite 340		Transaction ID : INCA507	
City Sacramento	State CA	Zip Code 95814	Amount of Each Receipt this Period _____ 500.00 <input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee.		C	
Name of Employer Jesse Ortiz Law	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) C. Joseph J. Williams		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 22 / 2016	
Mailing Address 39 Adler Cir.		Transaction ID : INCA556	
City Sacramento	State CA	Zip Code 95864	Amount of Each Receipt this Period _____ 200.00 <input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee.		C	
Name of Employer Williams Consulting	Occupation Engineer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 450.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1200.00
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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 14 OF 126

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
William Dentino

Mailing Address 3500 Douglas Blvd., Suite 160

City Roseville State CA Zip Code 95661

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

Name of Employer self Occupation attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2016

Transaction ID : INCA499

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 1135 Lynndale Drive

City Sacramento State CA Zip Code 95864

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

Name of Employer Anton Development Company Occupation Real Estate Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2016

Transaction ID : INCA501

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 355 Mountain View Dr.

City FOLSOM State CA Zip Code 95630

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2016

Transaction ID : INCA509

Amount of Each Receipt this Period
 100.00

Memo Item

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

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

1350.00

**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 15 OF 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David Picton

Mailing Address 4220 Stockton Blvd

City Sacramento State CA Zip Code 95820

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

Name of Employer Fix Auto Sacramento Occupation Auto Body and Paint

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2016

Transaction ID : INCA511

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 3337 Saxonville Way

City Antelope State CA Zip Code 95843

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

Name of Employer Word & Brown Companies OC Occupation National Benefit Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2016

Transaction ID : INCA558

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 4530 Mapel Lane

City Carmichael State CA Zip Code 95608

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

Name of Employer Delta Dental of California Occupation Dentistry

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2016

Transaction ID : INCA557

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1550.00

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

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

FOR LINE NUMBER: PAGE 16 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Abrate

Mailing Address 655 University Ave. Ste 230

City State Zip Code
SACRAMENTO CA 95825

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

Name of Employer Occupation
Abrate & Olsen Law Group Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2016

Transaction ID : INCA560

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 2336

City State Zip Code
sacramento CA 95864

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

Name of Employer Occupation
The Gun Range self

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2016

Transaction ID : INCA513

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 1017 L St.

City State Zip Code
SACRAMENTO CA 95814

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

Name of Employer Occupation
Advocacy & Consulting Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2016

Transaction ID : INCA565

Amount of Each Receipt this Period
500.00

Memo Item

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

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

3450.00

**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 17 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
William Halldin

Mailing Address 4804 tenbury court

City State Zip Code
Rocklin CA 95677

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

Name of Employer Occupation
Halldin Public Relations Small Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
475.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 26 / 2016

Transaction ID : INCA563

Amount of Each Receipt this Period
125.00

Memo Item

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

Mailing Address 2067 Cadaleigh Ln.

City State Zip Code
ROSEVILLE CA 95747

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

Name of Employer Occupation
n/a Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 26 / 2016

Transaction ID : INCA561

Amount of Each Receipt this Period
125.00

Memo Item

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

Mailing Address 1107 9th Street

City State Zip Code
Sacramento CA 95814

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

Name of Employer Occupation
Sergeant Major Associates, Inc. advocate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 27 / 2016

Transaction ID : INCA515

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

2950.00

**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 18 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Roy Grant Deary

Mailing Address 431 chilham way

City Sacramento State CA Zip Code 95864

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

Name of Employer Nor-Cal Beverage Co., Inc. Occupation Executive Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2016

Transaction ID : INCA599

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Peter S. Deterding

Mailing Address 6848 Hillside Dr.

City Carmichael State CA Zip Code 95608

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

Name of Employer Diamond D Construction Occupation Construction

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2016

Transaction ID : INCA597

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address 912 J Street, #59

City Sacramento State CA Zip Code 95814

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2016

Transaction ID : INCA598

Amount of Each Receipt this Period
125.00

Memo Item

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

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

725.00

**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 19 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Amanda Jantz

Mailing Address 4120 Exa Ct.

City State Zip Code
SACRAMENTO CA 95821

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

Name of Employer Occupation
Calif. Medical Assoc. Administrator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 28 / 2016

Transaction ID : INCA593

Amount of Each Receipt this Period
1350.00

Memo Item

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

Mailing Address 5005 Vine Cir.

City State Zip Code
ROCKLIN CA 95765

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

Name of Employer Occupation
n/a Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 28 / 2016

Transaction ID : INCA569

Amount of Each Receipt this Period
125.00

Memo Item

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

Mailing Address 1301 Mariement Ave.

City State Zip Code
SACRAMENTO CA 95864

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

Name of Employer Occupation
Point West Insurance Insurance broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1526.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 28 / 2016

Transaction ID : NONA550

Amount of Each Receipt this Period
1526.00

Memo Item
Fundraising event

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

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

3001.00

**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 20 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ed Rincon

Mailing Address 1764 Santa Ynez Way

City State Zip Code
SACRAMENTO CA 95816

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

Name of Employer Occupation
Rincon design Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 28 / 2016

Transaction ID : INCA588

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1764 Santa Ynez Way

City State Zip Code
SACRAMENTO CA 95816

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

Name of Employer Occupation
Rincon Design Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 28 / 2016

Transaction ID : INCA587

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Frank E. Schetter

Mailing Address 209 Delta Oaks Way

City State Zip Code
Sacramento CA 95831

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

Name of Employer Occupation
Schetter Electric, Inc. President/Electrical Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 28 / 2016

Transaction ID : INCA542

Amount of Each Receipt this Period
1350.00

Memo Item

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

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

1850.00

**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 21 OF 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James E. Teel

Mailing Address PO Box 15618

City Sacramento State CA Zip Code 95852

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

Name of Employer n/a Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2016

Transaction ID : INCA540

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address P.O. Box 15618

City SACRAMENTO State CA Zip Code 95852

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

Name of Employer n/a Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2016

Transaction ID : INCA541

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 2751 Northrop Ave.

City SACRAMENTO State CA Zip Code 95864

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

Name of Employer Sacramento Metro Fire Occupation Chief

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2016

Transaction ID : INCA595

Amount of Each Receipt this Period
500.00

Memo Item

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

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

5900.00

**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 22 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Tammara Wilcox

Mailing Address 4874 Kipling Dr.

City State Zip Code
CARMICHAEL CA 95608

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Best efforts letter sent 2/4/16 Best efforts letter sent 2/4/16

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA586

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 1076 Elk Hills Dr.

City State Zip Code
GALT CA 95632

FEC ID number of contributing federal political committee.

Name of Employer Occupation
County of San Joaquin Law Enforcement

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA636

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 8691 Equus

City State Zip Code
Fair Oaks CA 95628

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Westcal Management President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA553

Amount of Each Receipt this Period

Memo Item

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

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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 23 OF 126

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
George T. Kammerer

Mailing Address P.O. Box 951

City Sloughouse State CA Zip Code 95683

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

Name of Employer n/a Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 01 / 2016

Transaction ID : INCA626

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1460 8th Ave.

City SACRAMENTO State CA Zip Code 95818

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

Name of Employer Sac Valley Ambulance Occupation Pres.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 01 / 2016

Transaction ID : INCA640

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 9857 Horn Road

City Sacramento State CA Zip Code 95827

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

Name of Employer Fite Properties, Inc. Occupation Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 02 / 2016

Transaction ID : INCA555

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3950.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 24 OF 126

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Cara Fite

Mailing Address 9857 Horn Road

City Sacramento State CA Zip Code 95827

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

Name of Employer self Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2016

Transaction ID : INCA578

Amount of Each Receipt this Period
 2700.00

Memo Item

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

Mailing Address 1112 11th street

City Sacramento State CA Zip Code 95814

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

Name of Employer Cordano Company Occupation Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : INCA610

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address P.O. Box 870

City WILTON State CA Zip Code 95693

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

Name of Employer Steele Realty Occupation Real estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : INCA622

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).....

3450.00

**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 25 OF 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Edward Gillum

Mailing Address 5347 Battlewood Way

City State Zip Code
CARMICHAEL CA 95608

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

Name of Employer Occupation
Edward R. Gillum Consultant, Inc. Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : INCA660

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1364 Fitch Way

City State Zip Code
Sacramento CA 95864

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

Name of Employer Occupation
Ross & Associates Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2016

Transaction ID : INCA665

Amount of Each Receipt this Period
1350.00

Memo Item

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

Mailing Address 2939 Academy Way

City State Zip Code
Sacramento CA 95815

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

Name of Employer Occupation
Pacific Neon Company Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : INCA672

Amount of Each Receipt this Period
400.00

Memo Item

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

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

2000.00

**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 26 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jeffrey Adkins		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 18 / 2016	
Mailing Address 12641 Tessie Pl		Transaction ID : INCA674	
City Wilton	State CA	Zip Code 95693	Amount of Each Receipt this Period _____ 1350.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Future Energy Corporation	Occupation Solar Installer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3700.00		

Full Name (Last, First, Middle Initial) B. WILLIAM (BILL) MILLER		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 19 / 2016	
Mailing Address 8790 WINDING WAY		Transaction ID : INCA682	
City FAIR OAKS	State CA	Zip Code 95628	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer SACRAMENTO COUNTY SHERIFF'S DEPT. (r)	Occupation LAW ENFORCEMENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1200.00		

Full Name (Last, First, Middle Initial) C. Mark Ledlow		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 22 / 2016	
Mailing Address 615 Crestview Loop		Transaction ID : INCA686	
City Grants Pass	State OR	Zip Code 97527	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Armor Bearer Protective Services	Occupation Security Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 425.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1650.00
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 27 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Irena Richards

Mailing Address 3337 Saxonville Way

City State Zip Code
Antelope CA 95843

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

Name of Employer Occupation
Word & Brown Companies OC National Benefit Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : INCA691

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 5506 sur mer dr

City State Zip Code
el dorado hills CA 95762

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

Name of Employer Occupation
beverage management beverage distribution

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : INCA688

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 6620 Jarrett Court

City State Zip Code
Elk Grove CA 95757

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

Name of Employer Occupation
Self Contract writer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2016

Transaction ID : INCA711

Amount of Each Receipt this Period
1350.00

Memo Item

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

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

4250.00

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

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

FOR LINE NUMBER: PAGE 28 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Richard Book

Mailing Address 2114 Frascati Dr.

City El Dorado Hills State CA Zip Code 95762

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

Name of Employer n/a Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2016

Transaction ID : INCA723

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Tim P. Burke

Mailing Address 8500 Linda Creek Ct.

City Orangevale State CA Zip Code 95662

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

Name of Employer Quest Occupation President/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2016

Transaction ID : INCA725

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Donald R. Deary

Mailing Address 2286 Stone Blvd.

City West Sacramento State CA Zip Code 95691

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

Name of Employer NorCal Beverage Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2016

Transaction ID : INCA721

Amount of Each Receipt this Period
 400.00

Memo Item

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

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

3900.00

**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 29 OF 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
K. Mark Nelson

Mailing Address 12211 Pear Ln.

City: WILTON State: CA Zip Code: 95693

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

Name of Employer: Five Star Land and Livestock Occupation: Rancher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 25 / 2016

Transaction ID : INCA724

Amount of Each Receipt this Period: 250.00

Memo Item

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

Mailing Address 623 glen oak court

City: folsom State: CA Zip Code: 95630

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

Name of Employer: Buzz Oates Occupation: CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1350.00

Date of Receipt: 03 / 01 / 2016

Transaction ID : INCA750

Amount of Each Receipt this Period: 1350.00

Memo Item

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

Mailing Address 3400 Chapin Ct.

City: Placerville State: CA Zip Code: 95667

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

Name of Employer: Western Sign Co.,Inc. Occupation: President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 03 / 01 / 2016

Transaction ID : INCA752

Amount of Each Receipt this Period: 500.00

Memo Item

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

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

2100.00

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

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

FOR LINE NUMBER: PAGE 30 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Erik S. Maness

Mailing Address 711 G St.

City Sacramento State CA Zip Code 95814

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

Name of Employer Sacramento County Sheriff's Dept. Occupation Captain

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2016

Transaction ID : INCA729

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ryan O'Brien

Mailing Address P.O. Box 1837

City FAIR OAKS State CA Zip Code 95628

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

Name of Employer n/a Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2016

Transaction ID : INCA747

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 1633 Terracina Drive

City El Dorado Hills State CA Zip Code 95762

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

Name of Employer Self Occupation Physician/Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2016

Transaction ID : INCA727

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).....

650.00

**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 31 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Paul H. Snider

Mailing Address 5150 Madison Ave.

City Sacramento State CA Zip Code 95841

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

Name of Employer Snider Auto Dealership Occupation Auto Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2016

Transaction ID : INCA782

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 10551 W. Stockton Blvd

City Elk Grove State CA Zip Code 95757

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

Name of Employer Elk Grove Milling Occupation Owner/Chief Executive Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2016

Transaction ID : INCA754

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address 2067 Cadaleigh Ln.

City ROSEVILLE State CA Zip Code 95747

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

Name of Employer n/a Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2016

Transaction ID : INCA758

Amount of Each Receipt this Period
200.00

Memo Item

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

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

1100.00

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

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

FOR LINE NUMBER: PAGE 32 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lawrence Cassidy

Mailing Address 700 Leisure Ln.

City Sacramento State CA Zip Code 95815

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

Name of Employer n/a Occupation Best efforts letter sent 12/18/15

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : INCA829

Amount of Each Receipt this Period
 200.00

Memo Item

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

Mailing Address 809 Wimbledon Ct.

City SACRAMENTO State CA Zip Code 95864

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

Name of Employer n/a Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : INCA828

Amount of Each Receipt this Period
 800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Russel and Jennifer Gallaway

Mailing Address 471 Hopkins Road

City Sacramento State CA Zip Code 95864

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

Name of Employer Gallaway Commercial, Inc. Occupation Commercial Real Estate Broker and Land

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : INCA774

Amount of Each Receipt this Period
 400.00

Memo Item

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

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

1400.00

**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 33 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Pamela Herger

Mailing Address 9841 Brierton Ct.

City Elk Grove State CA Zip Code 95757

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

Name of Employer Retired Occupation Registered nurse

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : INCA776

Amount of Each Receipt this Period
 200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Rex S. Hime

Mailing Address 1121 L St., #809

City Sacramento State CA Zip Code 95814

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

Name of Employer California Business Properties Associa Occupation Government Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : INCA827

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 2336 St marks way

City Sacramento State CA Zip Code 95864

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

Name of Employer n/a Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2016

Transaction ID : INCA790

Amount of Each Receipt this Period
 1350.00

Memo Item

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

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

2050.00

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

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

FOR LINE NUMBER: PAGE 34 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Pamela Herger

Mailing Address 9841 Brierton Ct.

City Elk Grove State CA Zip Code 95757

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

Name of Employer Retired Occupation Registered nurse

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2016

Transaction ID : INCA844

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 615 Crestview Loop

City Grants Pass State OR Zip Code 97527

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

Name of Employer Armor Bearer Protective Services Occupation Security Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2016

Transaction ID : INCA788

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 4250 Rolling Oaks Drive

City Granite Bay State CA Zip Code 95746

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

Name of Employer Warner, Pank, Salzillo & Sanchez Occupation Legislative Advocacy

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2016

Transaction ID : INCA786

Amount of Each Receipt this Period
500.00

Memo Item

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 35 OF 126
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 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dieter Dahmen

Mailing Address 6208 Shadowcreek Dr.

City Carmichael, State CA Zip Code 95608

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 07 / 2016

Transaction ID : INCA894

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Roy Grant Deary

Mailing Address 431 chilham way

City Sacramento State CA Zip Code 95864

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

Name of Employer Nor-Cal Beverage Co., Inc. Occupation Executive Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 07 / 2016

Transaction ID : INCA890

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address 3530 Auburn Blvd #8

City Sacramento State CA Zip Code 95821

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

Name of Employer Just Guns Occupation Retail Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 07 / 2016

Transaction ID : INCA889

Amount of Each Receipt this Period
750.00

Memo Item

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 36 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mark Enes

Mailing Address 3349 Sierra Oaks Drive

City Sacramento State CA Zip Code 95864

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

Name of Employer AKT Investments Occupation Executive Vice President

Receipt For: 2016
 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 / 2016

Transaction ID : INCA796

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 912 J Street, #59

City Sacramento State CA Zip Code 95814

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2016

Transaction ID : INCA800

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address P.O. Box 1104

City ELK GROVE State CA Zip Code 95759

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

Name of Employer Chris Hansen and Assoc. Insurance Occupation Insurance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2016

Transaction ID : INCA893

Amount of Each Receipt this Period
200.00

Memo Item

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

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

3100.00

**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 37 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Darshan Mundy

Mailing Address 4810 Chiles Rd.

City State Zip Code
DAVIS CA 95618

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

Name of Employer Occupation
Terra Investments Owner

Receipt For: 2016
 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 / 2016

Transaction ID : INCA878

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 980 9th Street, Suite 340

City State Zip Code
Sacramento CA 95814

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

Name of Employer Occupation
Jesse Ortiz Law Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2016

Transaction ID : INCA907

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address 701 G St

City State Zip Code
Sacramento CA 95814

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

Name of Employer Occupation
County of Sacramento Sheriff's lieutenant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2016

Transaction ID : INCA810

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).....

3350.00

**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 38 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jessica Rincon

Mailing Address 1764 Santa Ynez Way

City State Zip Code
SACRAMENTO CA 95816

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

Name of Employer Occupation
Rincon Design Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 07 / 2016

Transaction ID : INCA845

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address 4731 Chancery Way

City State Zip Code
Carmichael CA 95608

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

Name of Employer Occupation
Lincoln Law School Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 07 / 2016

Transaction ID : INCA896

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address 4500 S. Park Dr.

City State Zip Code
SACRAMENTO CA 95821

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

Name of Employer Occupation
Taylor & Wiley Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 07 / 2016

Transaction ID : INCA877

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

1800.00

**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 39 OF 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jeffrey Adkins

Mailing Address 12641 Tessie Pl

City Wilton State CA Zip Code 95693

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

Name of Employer Future Energy Corporation Occupation Solar Installer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : INCA916

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 12641 Tessie Pl

City Wilton State CA Zip Code 95693

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

Name of Employer Future Energy Corporation Occupation Solar Installer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : INCA855

Amount of Each Receipt this Period
350.00

Memo Item

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

Mailing Address 1 Jelly Belly Ln.

City FAIRFIELD State CA Zip Code 94533

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

Name of Employer Jelly Belly Candy Co. Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : INCA871

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1850.00

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

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

FOR LINE NUMBER: PAGE 40 OF 126
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Carl Blaine

Mailing Address 589 Rodante Way

City State Zip Code
SACRAMENTO CA 95864

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

Name of Employer Occupation
WKBK&Y Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2016

Transaction ID : INCA859

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 10640 Mather Blvd. #200

City State Zip Code
MATHER CA 95655

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

Name of Employer Occupation
WKBK&Y Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2016

Transaction ID : INCA858

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 3337 Saxonville Way

City State Zip Code
Antelope CA 95843

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

Name of Employer Occupation
Word & Brown Companies OC National Benefit Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2016

Transaction ID : INCA864

Amount of Each Receipt this Period
125.00

Memo Item

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

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

1125.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 11e 15
 PAGE 41 OF 126

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Greg Kassis

Mailing Address 4825 Amber Lane, #B

City Sacramento State CA Zip Code 95841

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

Name of Employer Country Club Lanes Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : INCA927

Amount of Each Receipt this Period
125.00

Memo Item

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

Mailing Address 3406 Clemens Way

City Sacramento State CA Zip Code 95864

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

Name of Employer Zurich North America Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 14 / 2016

Transaction ID : INCA900

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1545 Misty Ln.

City ROSEVILLE State CA Zip Code 95747

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

Name of Employer Armour Steel Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2156.13**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 15 / 2016

Transaction ID : NONA1014

Amount of Each Receipt this Period
1684.89

Memo Item
FUNDRAISING EVENT

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

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

2309.89

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 42 OF 126

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert Maragliano

Mailing Address PO Box 245

City Walnut Grove State CA Zip Code 95690

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

Name of Employer Sun Harvest, Inc. Occupation Farmer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2016

Transaction ID : INCA1127

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 7433 Greenback Ln.

City Citrus Heights State CA Zip Code 95610

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

Name of Employer Stone's Gambling Hall Occupation Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2016

Transaction ID : INCA932

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 23 Adler Circle

City Sacramento State CA Zip Code 95864

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2016

Transaction ID : INCA921

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).....

1750.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 11e 15
 PAGE 43 OF 126

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Craig Fechter

Mailing Address 1870 Avondale Avenue Suite 4

City Sacramento State CA Zip Code 95825

FEC ID number of contributing federal political committee.

Name of Employer FEchter CPA Occupation Accountant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA918

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Gregory Padilla Bail Bonds

Mailing Address 901 H St., #102

City Sacramento State CA Zip Code 95814

FEC ID number of contributing federal political committee.

Name of Employer Unincorporated Occupation Partnership

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA925

Amount of Each Receipt this Period

Memo Item

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

Mailing Address P.O. Box 391

City SACRAMENTO State CA Zip Code 95812

FEC ID number of contributing federal political committee.

Name of Employer Greg Padilla Bail Bonds Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : IDTA2

Amount of Each Receipt this Period

Memo Item

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

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 44 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Irena Richards

Mailing Address 3337 Saxonville Way

City State Zip Code
Antelope CA 95843

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

Name of Employer Occupation
Word & Brown Companies OC National Benefit Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2016

Transaction ID : INCA1138

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1730 I St., #220

City State Zip Code
Sacramento CA 95811

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

Name of Employer Occupation
Law Offices of Gregory D. Thatch Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2016

Transaction ID : INCA926

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address 3501 Autumn Point Ln.

City State Zip Code
CARMICHAEL CA 95608

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

Name of Employer Occupation
Stewart Title Vice Pres.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : INCA960

Amount of Each Receipt this Period
200.00

Memo Item

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

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

625.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 45 OF 126

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mark Cooper

Mailing Address PO Box 41360

City Sacramento State CA Zip Code 95841

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

Name of Employer H&D Electric Occupation Electrical Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : INCA929

Amount of Each Receipt this Period
 1350.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Joseph J. Williams

Mailing Address 39 Adler Cir.

City Sacramento State CA Zip Code 95864

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

Name of Employer Williams Consulting Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : INCA962

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Ronald L. Alvarado

Mailing Address 5416 Bennington Way

City Sacramento State CA Zip Code 95826

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

Name of Employer SBM Site Services Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : INCA985

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).....

1850.00

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

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

FOR LINE NUMBER: PAGE 46 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John E. Anderson

Mailing Address P.O. Box 1280

City Rancho Murieta State CA Zip Code 95683

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

Name of Employer n/a Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : INCA986

Amount of Each Receipt this Period
2000.00

Memo Item

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

Mailing Address 1191 Lakehills Ct

City El Dorado Hills State CA Zip Code 95762

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

Name of Employer Self Occupation Oral Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : INCA958

Amount of Each Receipt this Period
125.00

Memo Item

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

Mailing Address 7509 Sangiovese Dr.

City El Dorado Hills State CA Zip Code 95762

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

Name of Employer Retired Occupation Sacramento County Sheriff's Captain (R)

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : INCA964

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).....

2375.00

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

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

FOR LINE NUMBER: PAGE 47 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Corrick

Mailing Address 4005 Cayente Way

City Sacramento State CA Zip Code 95864

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

Name of Employer Nacht & Lewis Architects Occupation Architect

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : INCA979

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 5347 Battlewood Way

City CARMICHAEL State CA Zip Code 95608

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

Name of Employer Edward R. Gillum Consultant, Inc. Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : INCA984

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
H. Joseph Perrin

Mailing Address 7407 Pocket Rd.

City Sacramento State CA Zip Code 95831

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

Name of Employer n/a Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : INCA982

Amount of Each Receipt this Period
125.00

Memo Item

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

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

625.00

**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 48 OF 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John Grigsby

Mailing Address 5000 Bent Creek Ct.

City State Zip Code
EL DORADO HILLS CA 95762

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

Name of Employer Occupation
n/a Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : INCA1002

Amount of Each Receipt this Period
375.00

Memo Item

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

Mailing Address 4804 tenbury court

City State Zip Code
Rocklin CA 95677

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

Name of Employer Occupation
Halldin Public Relations Small Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
475.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : INCA997

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3340 Rolls Dr.

City State Zip Code
Shingle Springs CA 95682

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

Name of Employer Occupation
El Dorado County Auditor/Controller

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : INCA998

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).....

875.00

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

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

FOR LINE NUMBER: PAGE 49 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Vern Jones

Mailing Address 7640 Tobia Way

City State Zip Code
FAIR OAKS CA 95628

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

Name of Employer Occupation
Energy Operations Management Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : INCA1003

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 5005 Vine Cir.

City State Zip Code
ROCKLIN CA 95765

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

Name of Employer Occupation
n/a Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : INCA994

Amount of Each Receipt this Period
 125.00

Memo Item

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

Mailing Address 615 Crestview Loop

City State Zip Code
Grants Pass OR 97527

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

Name of Employer Occupation
Armor Bearer Protective Services Security Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : INCA1001

Amount of Each Receipt this Period
 125.00

Memo Item

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 50 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mahle, C. Emmett

Mailing Address 901 H St., #203

City Sacramento State CA Zip Code 95814

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

Name of Employer Self - same name Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : INCA1000

Amount of Each Receipt this Period
125.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mahle, C. Emmett

Mailing Address 901 H St., #203

City Sacramento State CA Zip Code 95814

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

Name of Employer Self - same name Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : INCA990

Amount of Each Receipt this Period
125.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Paul H. Snider

Mailing Address 5150 Madison Ave.

City Sacramento State CA Zip Code 95841

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

Name of Employer Snider Auto Dealership Occupation Auto Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : INCA993

Amount of Each Receipt this Period
500.00

Memo Item

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

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

750.00

**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 51 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Richard Moorhouse

Mailing Address 1191 Lakehills Ct

City El Dorado Hills State CA Zip Code 95762

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

Name of Employer Self Occupation Oral Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : INCA981

Amount of Each Receipt this Period
125.00

Memo Item

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

Mailing Address 3704 Huff Way

City SACRAMENTO State CA Zip Code 95821

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

Name of Employer County of Sacramento Occupation Special Assistant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **371.56**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : NONA1029

Amount of Each Receipt this Period
371.56

Memo Item
Fundraising event

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

Mailing Address 1545 Misty Ln.

City ROSEVILLE State CA Zip Code 95747

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

Name of Employer Armour Steel Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2156.13**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : NONA1013

Amount of Each Receipt this Period
471.24

Memo Item
FUNDRAISING EVENT

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

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

967.80

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

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

FOR LINE NUMBER: PAGE 52 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHY I Management

Mailing Address 2555 Third St., #200

City Sacramento State CA Zip Code 95818

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

Name of Employer Not incorporated Occupation Partnership

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : INCA1006

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 6247 Calle Montalvo Cir.

City GRANITE BAY State CA Zip Code 95746

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

Name of Employer n/a Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : INCA1007

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address P.O. Box 1104

City ELK GROVE State CA Zip Code 95759

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

Name of Employer Chris Hansen and Assoc. Insurance Occupation Insurance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : INCA1009

Amount of Each Receipt this Period
125.00

Memo Item

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

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

3325.00

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

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

FOR LINE NUMBER: PAGE 53 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ronald Lawrence

Mailing Address 3730 Clover Valley Rd.

City State Zip Code
ROCKLIN CA 95677

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

Name of Employer Occupation
City of Rocklin Chief of Police

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : INCA1010

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 4020 Sierra College Blvd. 200

City State Zip Code
ROCKLIN CA 95677

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

Name of Employer Occupation
Western Care Orphanage Administrator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : INCA1012

Amount of Each Receipt this Period
 2700.00

Memo Item

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

Mailing Address 8505 Kingsgate Dr.

City State Zip Code
GRANITE BAY CA 95746

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

Name of Employer Occupation
Sharif Jewelers Jeweler

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : INCA1005

Amount of Each Receipt this Period
 1350.00

Memo Item

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

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

4300.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 54 OF 126

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R. Scott Yuill

Mailing Address 2337 Clubhouse Dr.

City State Zip Code
 ROCKLIN CA 95765

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

Name of Employer Occupation
 Scott Yuill Insurance Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : INCA1011

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 3021 Orchard Park Way

City State Zip Code
 Loomis CA 95650

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

Name of Employer Occupation
 Sacramento County Law Enforcement

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2016

Transaction ID : INCA1016

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
L and D Landfill, Limited Partnership

Mailing Address PO Box 255009

City State Zip Code
 Sacramento CA 95865

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

Name of Employer Occupation
 Not incorporated Partnership

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2016

Transaction ID : INCA1021

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

1750.00

**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 55 OF 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lien, Norman

Mailing Address P.O. Box 255009

City State Zip Code
SACRAMENTO CA 95865

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

Name of Employer Occupation
L and D Landfill Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2016

Transaction ID : IDTA6

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 8336 Alpine Laurel Way

City State Zip Code
Sacramento CA 95829

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

Name of Employer Occupation
McCollum Associates Land Use Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2016

Transaction ID : INCA1018

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1549 Kingsford Dr.

City State Zip Code
CARMICHAEL CA 95608

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

Name of Employer Occupation
n/a Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2016

Transaction ID : INCA1082

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3200.00

**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 56 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Steven Merksamer

Mailing Address 5209 Yorkville Place

City State Zip Code
Carmichael CA 95608

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

Name of Employer Occupation
Nielsen Marksamer Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2016

Transaction ID : INCA1028

Amount of Each Receipt this Period
 2700.00

Memo Item

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

Mailing Address 2665 Mercantile Dr.

City State Zip Code
Rancho Cardova CA 95742

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

Name of Employer Occupation
Sunrise Manufacturing, Inc. Manufacturer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2016

Transaction ID : INCA1083

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Paul H. Snider

Mailing Address 5150 Madison Ave.

City State Zip Code
Sacramento CA 95841

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

Name of Employer Occupation
Snider Auto Dealership Auto Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2016

Transaction ID : INCA1098

Amount of Each Receipt this Period
 1700.00

Memo Item

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

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

5400.00

**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 57 OF 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Renee Snider

Mailing Address 5150 Madison Ave.

City State Zip Code
SACRAMENTO CA 95841

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

Name of Employer Occupation
n/a Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2016

Transaction ID : INCA1099

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 4609 Belcrest Way

City State Zip Code
Sacramento CA 95821

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

Name of Employer Occupation
n/a Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2016

Transaction ID : INCA1097

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1419 11th Ave.

City State Zip Code
Sacramento CA 95818

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

Name of Employer Occupation
Westnads Water Dist. Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : INCA1033

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

3950.00

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

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

FOR LINE NUMBER: PAGE 58 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. Edward Brooks

Mailing Address 2315 Capitol Ave.

City State Zip Code
SACRAMENTO CA 95816

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

Name of Employer Occupation
Gavrilov & Brooks Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : NONA1084

Amount of Each Receipt this Period
300.00

Memo Item
Food for fundraiser

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

Mailing Address 3643 West Lincoln Ave

City State Zip Code
Sacramento CA 95818

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

Name of Employer Occupation
Genovese Burford & Brothers Financial Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : INCA1031

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 3948 17th Avenue

City State Zip Code
Sacramento CA 95820

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

Name of Employer Occupation
White River Roofing Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : INCA1059

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).....

3250.00

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

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

FOR LINE NUMBER: PAGE 59 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
andrew fox

Mailing Address 440 bret harte

City: sacramento State: CA Zip Code: 95864

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

Name of Employer: smg Occupation: physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 30 / 2016

Transaction ID : INCA1042

Amount of Each Receipt this Period: 250.00

Memo Item

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

Mailing Address 2315 Capitol Avenue

City: Sacramento State: CA Zip Code: 95816

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

Name of Employer: Gavrilov & Brooks Occupation: Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 03 / 30 / 2016

Transaction ID : INCA1053

Amount of Each Receipt this Period: 500.00

Memo Item

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

Mailing Address 2315 Capitol Avenue

City: Sacramento State: CA Zip Code: 95816

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

Name of Employer: Gavrilov & Brooks Occupation: Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 03 / 30 / 2016

Transaction ID : INCA1073

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Geno Genov

Mailing Address 7056 Larchmont Drive

City North Highlands State CA Zip Code 95660

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

Name of Employer Verizon Occupation Operations Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : INCA1075

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 548 Market Street

City San Francisco State CA Zip Code 94104

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

Name of Employer Goradia Medical Corp Occupation Neuro Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : INCA1069

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 4853 Moreau Ct.

City EL DORADO HILLS State CA Zip Code 95762

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

Name of Employer Hanson McClain Occupation Financial advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : INCA1173

Amount of Each Receipt this Period
 2700.00

Memo Item

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

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

3200.00

**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 61 OF 126
	<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	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Aaron Hodgkins

Mailing Address 7795 Sierra Drive

City State Zip Code
Granite Bay CA 95746

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

Name of Employer Occupation
Pacific Premier Bank Banking

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : INCA1061

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 6016 Alta Loma Place

City State Zip Code
Granite Bay CA 95746

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

Name of Employer Occupation
McClellan Park President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : INCA1038

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 702 Howe Avenue

City State Zip Code
Sacramento CA 95825

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

Name of Employer Occupation
All Med Medical Corp Doctor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : INCA1065

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 62 OF 126

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael McGlothlin

Mailing Address 3045 Bastone Court

City State Zip Code
 West Sacramento CA 95691

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

Name of Employer Occupation
 Golden Days ADHC Health Care

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : INCA1063

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address P.O. Box 980454

City State Zip Code
 West Sacramento CA 95798

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

Name of Employer Occupation
 Bondars Logistics CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : INCA1071

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 8428 Oak Flat Way

City State Zip Code
 Antelope CA 95843

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

Name of Employer Occupation
 Capital Group Realty Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : INCA1067

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).....

750.00

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

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

FOR LINE NUMBER: PAGE 63 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ronald Richey

Mailing Address 3307 Swallows Nest Lane

City Sacramento State CA Zip Code 95833

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

Name of Employer Self Occupation Real Estate Investments

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : INCA1036

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 4094 Morning View Way

City El Dorado Hills State CA Zip Code 95762

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

Name of Employer LEHR Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : INCA1040

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1432 Grovewood Ln.

City Roseville State CA Zip Code 95747

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

Name of Employer Advanta Homes Occupation Realtor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
418.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : NONA1085

Amount of Each Receipt this Period
168.00

Memo Item
Supplies for fundraiser

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

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

668.00

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

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

FOR LINE NUMBER: PAGE 64 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ron Alvarado

Mailing Address 8416 Bennington Way

City Sacramento State CA Zip Code 95826

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

Name of Employer SBM Management Occupation Facilities Services/Management

Receipt For: 2016
 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 / 2016

Transaction ID : INCA1079

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1420 Shadow Mountain Ct.

City AUBURN State CA Zip Code 95602

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

Name of Employer n/a Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : INCA1166

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 600 Q St. #200

City SACRAMENTO State CA Zip Code 95811

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

Name of Employer Buehler & Buehler Occupation CEO

Receipt For: 2016
 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 / 2016

Transaction ID : INCA1172

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).....

3200.00

**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 65 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Martin Omar Kitanoff

Mailing Address 2082 University Park Dr.

City Sacramento State CA Zip Code 95825

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

Name of Employer Kitanoff Group International Occupation CEO & General Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : INCA1093

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1390 Shady Tree Ln

City Meadow Vista State CA Zip Code 95722

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

Name of Employer Innovations Health Systems Occupation Business Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : INCA1091

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 9960 Phoenician Way

City Sacramento State CA Zip Code 95829

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

Name of Employer Romex Transport Occupation President

Receipt For: 2016
 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 / 2016

Transaction ID : INCA1169

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).....

1250.00

**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 66 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
mike roppolo

Mailing Address 3769 Mossridge way

City el dorado hills State CA Zip Code 95762

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

Name of Employer ABM industries Occupation senior VP mergers and aquisitions

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **675.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : INCA1089

Amount of Each Receipt this Period
675.00

Memo Item

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

Mailing Address 845 University Ave.

City SACRAMENTO State CA Zip Code 95825

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 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 / 2016

Transaction ID : INCA1170

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1432 Grovewood Ln.

City Roseville State CA Zip Code 95747

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

Name of Employer Advanta Homes Occupation Realtor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **418.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : INCA1168

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).....

1175.00

131646.69

**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 67 OF 126
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Friends of Roberta Macglashan for County Supervisor

Mailing Address 11471 Round House Court

City State Zip Code
Gold River CA 95670

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2016

Transaction ID : INCA506

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
COMMON SENSE PAC TO COMBAT HYPOCRISY

Mailing Address 4949 DOLLHOUSE RD.

City State Zip Code
PLACERVILLE CA 95667

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
203.87

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 01 / 2016

Transaction ID : INCA551

Amount of Each Receipt this Period
203.87

Memo Item

C. Full Name (Last, First, Middle Initial)
Kevin McCarthy for Congress

Mailing Address P.O. Box 12667

City State Zip Code
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C** C00420935

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : INCA760

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

2403.87

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

Form/Schedule: SA11C

Transaction ID : INCA551

FUNDS FROM PERMISSIBLE SOURCES

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 69 OF 126
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kevin McCarthy for Congress

Mailing Address P.O. Box 12667

City State Zip Code
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C** C00420935

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : INCA759

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Majority Committee PAC

Mailing Address P.O. Box 10134

City State Zip Code
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : INCA762

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Majority Committee PAC

Mailing Address P.O. Box 10134

City State Zip Code
BAKERSFIELD CA 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : INCA761

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

12000.00

**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 70 OF 126
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Carpenters' Legislative Improvement Committee

Mailing Address 101 Constitution Ave. NW 10th Fl.

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2016

Transaction ID : INCA875

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
McClintock for Congress

Mailing Address 2150 River Plaza Dr., #150

City State Zip Code
SACRAMENTO CA 95833

FEC ID number of contributing federal political committee. **C** C00446815

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2016

Transaction ID : INCA876

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SACRAMENTO VALLEY LINCOLN CLUB

Mailing Address 2150 RIVER PLAZA DR. #150

City State Zip Code
SACRAMENTO CA 95833

FEC ID number of contributing federal political committee. **C** C00377051

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2016

Transaction ID : INCA922

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

9700.00

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

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

FOR LINE NUMBER: PAGE 71 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SHERIFF SCOTT JONES FOR CONGRESS

A. Committee to Re-Elect Judge Brooks
 Full Name (Last, First, Middle Initial)
 Mailing Address 943 King Henry Way
 City EL DORADO HILLS State CA Zip Code 95762
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 500.00

Date of Receipt 03 / 23 / 2016
Transaction ID : INCA1004
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Robbie Waters for Supervisor - 2014
 Full Name (Last, First, Middle Initial)
 Mailing Address 6200 Allenport Way
 City Sacramento State CA Zip Code 95831
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt 03 / 23 / 2016
Transaction ID : INCA992
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Lincoln Club of Placer County
 Full Name (Last, First, Middle Initial)
 Mailing Address 9321 Silverbend Ln.
 City ELK GROVE State CA Zip Code 95624
 FEC ID number of contributing federal political committee. C C00557876
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2700.00

Date of Receipt 03 / 25 / 2016
Transaction ID : INCA1008
 Amount of Each Receipt this Period 2700.00
 Memo Item

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

4200.00
 28303.87

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : INCA1004

Funds from permissible sources

Form/Schedule: SA11C

Transaction ID: INCA992

Funds from permissible sources

**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 73 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. David Bauer			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016		
Mailing Address 2150 River Plaza Dr., #150			Amount of Each Disbursement this Period 388.70		
City SACRAMENTO	State CA	Zip Code 95833	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Accounting svc.		Category/ Type 001			
Candidate Name			Transaction ID : EXPB391		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. Capital Development Strategies, John Bovee			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016		
Mailing Address 1127 - 11th St., #310			Amount of Each Disbursement this Period 11271.46		
City Sacramento	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Fundraising commission		Category/ Type 003			
Candidate Name			Transaction ID : EXPB392		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) c. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 258.80		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001			
Candidate Name			Transaction ID : EXPB406		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....	11918.96
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 74 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gilliard Blanning & Assoc., Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016		
Mailing Address 5701 Lonetree Blvd. #301			Amount of Each Disbursement this Period 13550.85		
City ROCKLIN	State CA	Zip Code 95765	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Mass mail		Category/ Type 003			
Candidate Name			Transaction ID : EXPB394		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Scott Jones			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016		
Mailing Address 5241 Treepond Court			Amount of Each Disbursement this Period 180.95		
City Antelope	State CA	Zip Code 95843	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Mileage		Category/ Type 002			
Candidate Name			Transaction ID : EXPB396		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Gilliard Blanning & Assoc., Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016		
Mailing Address 5701 Lonetree Blvd. #301			Amount of Each Disbursement this Period 3500.00		
City ROCKLIN	State CA	Zip Code 95765	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Campaign consulting		Category/ Type 001			
Candidate Name			Transaction ID : EXPB398		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	17231.80
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 75 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 41.80
City Sacramento	State CA Zip Code 95818	
Purpose of Disbursement Merchant fee	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : EXPB453
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 12.00
City SACRAMENTO	State CA Zip Code 95814	
Purpose of Disbursement Parking	Category/Type 002	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : EXPB441
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 33.00
City Sacramento	State CA Zip Code 95818	
Purpose of Disbursement Merchant fee	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : EXPB454
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	86.80
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 76 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 7.00	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB451	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 33.00	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB643	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 35.63	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB452	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	75.63
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 77 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address Sacramento International Airport		Amount of Each Disbursement this Period 603.20
City SACRAMENTO	State CA	
Zip Code 95838	Purpose of Disbursement Air fare	Transaction ID : EXPB443
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 1.75
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement Parking	Transaction ID : EXPB442
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 65.50
City Sacramento	State CA	
Zip Code 95818	Purpose of Disbursement Merchant fee	Transaction ID : EXPB472
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	670.45
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 78 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 65.50		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB474		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 185.13		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB475		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. Smithcinematic			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016		
Mailing Address 8596 Cortina Cir.			Amount of Each Disbursement this Period 1000.00		
City ROSEVILLE	State CA	Zip Code 95678	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Video production		Category/ Type 004	Transaction ID : EXPB462		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional)	1250.63
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 79 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 16.75
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Merchant fee Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : EXPB473
State: District:		

Full Name (Last, First, Middle Initial) B. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 7.50
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement Parking Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : EXPB612
State: District:		

Full Name (Last, First, Middle Initial) C. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 1.75
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement Parking Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : EXPB611
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	26.00
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 80 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 8.63	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB530	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 80.63	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB527	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 10.50	
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Parking		Category/ Type 002	Transaction ID : EXPB613	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	99.76
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 81 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016		
Mailing Address 900 I St.			Amount of Each Disbursement this Period 1.75		
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Parking		Category/ Type 002	Transaction ID : EXPB614		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 36.75		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB531		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Missa Mae Prints			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2016		
Mailing Address 730 Aberdeen Ln.			Amount of Each Disbursement this Period 1773.75		
City LINCOLN	State CA	Zip Code 95648	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Supplies		Category/ Type 001	Transaction ID : EXPB484		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1812.25
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 82 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 65.50
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Merchant fee 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB532
State: District:		

Full Name (Last, First, Middle Initial) B. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 9.13
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Merchant fee 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB528
State: District:		

Full Name (Last, First, Middle Initial) C. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 12.00
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement Parking 002 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB615
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	86.63
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 83 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 73.00		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB529		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 8.63		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB533		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 82.25		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB576		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	163.88
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 84 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 50.25
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Merchant fee Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : EXPB559
State: District:		

Full Name (Last, First, Middle Initial) B. David Bauer		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2016
Mailing Address 2150 River Plaza Dr., #150		Amount of Each Disbursement this Period 1221.30
City SACRAMENTO State CA Zip Code 95833	Purpose of Disbursement Accounting svc. Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : EXPB518
State: District:		

Full Name (Last, First, Middle Initial) c. Capital Development Strategies, John Bovee		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2016
Mailing Address 1127 - 11th St., #310		Amount of Each Disbursement this Period 12224.32
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Fundraising commission and expenses Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : EXPB517
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13495.87
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 85 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2016
Mailing Address 900 I St.			Amount of Each Disbursement this Period 7.50
City SACRAMENTO	State CA	Zip Code 95814	
Purpose of Disbursement Parking		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 002			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : EXPB616
State: District:			

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2016
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 25.38
City Sacramento	State CA	Zip Code 95818	
Purpose of Disbursement Merchant fee		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : EXPB562
State: District:			

Full Name (Last, First, Middle Initial) C. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2016
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 241.50
City Sacramento	State CA	Zip Code 95818	
Purpose of Disbursement Merchant fee		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : EXPB575
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	274.38
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 86 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Evan's Kitchen Catering			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2016		
Mailing Address 855 57th St., #C			Amount of Each Disbursement this Period 1697.10		
City SACRAMENTO	State CA	Zip Code 95819	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Catering		Category/ Type 003	Transaction ID : EXPB519		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Point West Insurance			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2016		
Mailing Address 1111 Howe Ave. #155			Amount of Each Disbursement this Period 220.00		
City SACRAMENTO	State CA	Zip Code 95825	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Insurance		Category/ Type 003	Transaction ID : EXPB516		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 45.38		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB566		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1962.48
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 87 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 176.00	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001		
Candidate Name		Transaction ID : EXPB574		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Image Outfitters Photography			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016	
Mailing Address 1264 Regent Cir.			Amount of Each Disbursement this Period 459.00	
City LINCOLN	State CA	Zip Code 95648	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Photography		Category/ Type 003		
Candidate Name		Transaction ID : EXPB534		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Steward Nelson			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016	
Mailing Address 1301 Mariement Ave.			Amount of Each Disbursement this Period 1526.00	
City SACRAMENTO	State CA	Zip Code 95864	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fundraising event		Category/ Type		
Candidate Name		Transaction ID : NONB550		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2161.00
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 88 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016		
Mailing Address 900 I St.			Amount of Each Disbursement this Period 9.00		
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Parking		Category/ Type 002	Transaction ID : EXPB617		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 13.50		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB644		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Point West Insurance			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016		
Mailing Address 1111 Howe Ave. #155			Amount of Each Disbursement this Period 48.60		
City SACRAMENTO	State CA	Zip Code 95825	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Insurance		Category/ Type 003	Transaction ID : EXPB537		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	71.10
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 89 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016		
Mailing Address 900 I St.			Amount of Each Disbursement this Period 13.50		
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Parking		Category/ Type 001			
Candidate Name		Transaction ID : EXPB702			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 44.26		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001			
Candidate Name		Transaction ID : EXPB572			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Gilliard Blanning & Assoc., Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016		
Mailing Address 5701 Lonetree Blvd. #301			Amount of Each Disbursement this Period 3500.00		
City ROCKLIN	State CA	Zip Code 95765	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Campaign consulting		Category/ Type 001			
Candidate Name		Transaction ID : EXPB549			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	3557.76
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 90 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 9.90	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB649	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 7.00	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB648	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 0.90	
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Parking		Category/ Type 002	Transaction ID : EXPB700	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	9.70
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 91 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 209.00	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB650	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 176.00	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB651	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Gilliard Blanning & Assoc., Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2016	
Mailing Address 5701 Lonetree Blvd. #301			Amount of Each Disbursement this Period 5350.00	
City ROCKLIN	State CA	Zip Code 95765	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Signs		Category/ Type 004	Transaction ID : EXPB608	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	5735.00
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 92 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gilliard Blanning & Assoc., Inc.			Date of Disbursement MM / DD / YYYY 02 / 05 / 2016	
Mailing Address 5701 Lonetree Blvd. #301			Amount of Each Disbursement this Period 5690.00	
City ROCKLIN	State CA	Zip Code 95765	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Signs		Category/ Type 004		
Candidate Name			Transaction ID : EXPB621	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. City of Sacramento			Date of Disbursement MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 18.00	
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Parking		Category/ Type 002		
Candidate Name			Transaction ID : EXPB699	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. eFundraising Connections			Date of Disbursement MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 40.00	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001		
Candidate Name			Transaction ID : EXPB652	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	5748.00
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 93 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 3.75
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Merchant fee 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB668
State: District:		

Full Name (Last, First, Middle Initial) B. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 7.00
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Merchant fee 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB669
State: District:		

Full Name (Last, First, Middle Initial) C. Polling America		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2016
Mailing Address 5701 Lonetree Blvd. #301		Amount of Each Disbursement this Period 4809.00
City ROCKLIN State CA Zip Code 95765	Purpose of Disbursement Phone system 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB657
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4819.75
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 94 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 1.80
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Merchant fee 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB670
State: District:		

Full Name (Last, First, Middle Initial) B. Half Rabbit Design, Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address 3701 52nd St.		Amount of Each Disbursement this Period 322.50
City SACRAMENTO State CA Zip Code 95820	Purpose of Disbursement Printing 003 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB661
State: District:		

Full Name (Last, First, Middle Initial) C. Scott Jones		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address 5241 Treepond Court		Amount of Each Disbursement this Period 313.60
City Antelope State CA Zip Code 95843	Purpose of Disbursement Mileage 002 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB662
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	637.90
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 95 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Edward R. Marszal Enterprises, Inc.			Date of Disbursement MM / DD / YYYY 02 / 15 / 2016		
Mailing Address 5805 Windmill Way			Amount of Each Disbursement this Period 1025.00		
City Carmichael	State CA	Zip Code 95608	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Rent		Category/ Type 001			
Candidate Name			Transaction ID : EXPB667		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement MM / DD / YYYY 02 / 18 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 26.50		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001			
Candidate Name			Transaction ID : EXPB692		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) c. eFundraising Connections			Date of Disbursement MM / DD / YYYY 02 / 19 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 88.25		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001			
Candidate Name			Transaction ID : EXPB693		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....	1139.75
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 96 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 7.00		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB694		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 189.50		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB745		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 14.00		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB746		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	210.50
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 97 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. David Bauer			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016		
Mailing Address 2150 River Plaza Dr., #150			Amount of Each Disbursement this Period 1138.50		
City SACRAMENTO	State CA	Zip Code 95833	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Accounting svc.		Category/ Type 001			
Candidate Name			Transaction ID : EXPB720		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Capital Development Strategies, John Bovee			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016		
Mailing Address 1127 - 11th St., #310			Amount of Each Disbursement this Period 8495.74		
City Sacramento	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Fundraising commission and expenses		Category/ Type 003			
Candidate Name			Transaction ID : EXPB718		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 13.50		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001			
Candidate Name			Transaction ID : EXPB744		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	9647.74
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 98 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 88.25		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001			
Candidate Name		Transaction ID : EXPB743			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Randy Peters Catering			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016		
Mailing Address 8144 Auburn Blvd.			Amount of Each Disbursement this Period 3257.79		
City CITRUS HEIGHTS	State CA	Zip Code 95610	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Catering		Category/ Type 003			
Candidate Name		Transaction ID : EXPB719			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Residence Inn			Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016		
Mailing Address 333 E St. SW			Amount of Each Disbursement this Period 819.84		
City WASHINGTON	State DC	Zip Code 20004	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Lodging		Category/ Type 002			
Candidate Name		Transaction ID : EXPB740			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	4165.88
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 99 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address 1500 - 11th St., Rm 495		Amount of Each Disbursement this Period 1740.00 <input type="checkbox"/> Memo Item
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Filing fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : EXPB865

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 215.99 <input type="checkbox"/> Memo Item
City Dallas State TX Zip Code 74266-0108	Purpose of Disbursement Phone svc. Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : EXPB734

Full Name (Last, First, Middle Initial) c. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 16.50 <input type="checkbox"/> Memo Item
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement Parking Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : EXPB737

SUBTOTAL of Disbursements This Page (optional).....	1972.49
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 100 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 61.18 <input type="checkbox"/> Memo Item
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Merchant fee Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB835
State: District:		

Full Name (Last, First, Middle Initial) B. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 13.50 <input type="checkbox"/> Memo Item
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement Parking Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB766
State: District:		

Full Name (Last, First, Middle Initial) C. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 45.88 <input type="checkbox"/> Memo Item
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Merchant fee Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EXPB831
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	61.18
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 101 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Amazon.com			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016		
Mailing Address www.amazon.com			Amount of Each Disbursement this Period 76.67		
City Cyberspace	State WA	Zip Code 98000	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Supplies		001			
Candidate Name		Category/ Type	Transaction ID : EXPB770		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Amazon.com			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016		
Mailing Address www.amazon.com			Amount of Each Disbursement this Period 42.38		
City Cyberspace	State WA	Zip Code 98000	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Supplies		001			
Candidate Name		Category/ Type	Transaction ID : EXPB769		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. Amazon.com			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016		
Mailing Address www.amazon.com			Amount of Each Disbursement this Period 59.73		
City Cyberspace	State WA	Zip Code 98000	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Supplies		001			
Candidate Name		Category/ Type	Transaction ID : EXPB768		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	178.78
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 102 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Amazon.com		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address www.amazon.com		Amount of Each Disbursement this Period 149.00
City Cyberspace	State WA	
Zip Code 98000		Transaction ID : EXPB767
Purpose of Disbursement Supplies		
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) B. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 161.25
City Sacramento	State CA	
Zip Code 95818		Transaction ID : EXPB832
Purpose of Disbursement Merchant fee		
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) C. Gilliard Blanning & Assoc., Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address 5701 Lonetree Blvd. #301		Amount of Each Disbursement this Period 3500.00
City ROCKLIN	State CA	
Zip Code 95765		Transaction ID : EXPB765
Purpose of Disbursement Campaign consulting		
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	

SUBTOTAL of Disbursements This Page (optional).....	3810.25
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 103 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USA Valet Parking		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address 980 9th St., #1620		Amount of Each Disbursement this Period 545.00
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement Parking services	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	Transaction ID : EXPB764
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 9.00
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement Parking	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : EXPB933
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 13.50
City Sacramento	State CA	
Zip Code 95818	Purpose of Disbursement Merchant fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB833
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	567.50
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 104 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 13.50
City SACRAMENTO	State CA	
Purpose of Disbursement Parking	Zip Code 95814	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB934
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 70.75
City Sacramento	State CA	
Purpose of Disbursement Merchant fee	Zip Code 95818	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB1218
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. TC Printing		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 1215 G St.		Amount of Each Disbursement this Period 1700.61
City Sacramento	State CA	
Purpose of Disbursement Printing	Zip Code 95814	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	Transaction ID : EXPB806
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1784.86
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 105 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 0.90	
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Parking		Category/ Type 002	Transaction ID : EXPB935	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) B. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 1.75	
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Parking		Category/ Type 002	Transaction ID : EXPB936	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) c. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 10.75	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB911	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	13.40
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 106 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

A. eFundraising Connections

Full Name (Last, First, Middle Initial)
Mailing Address 2131 Capitol Ave., #306

City Sacramento State CA Zip Code 95818

Purpose of Disbursement Merchant fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 03 / 08 / 2016

Amount of Each Disbursement this Period: 351.25

Memo Item

Transaction ID : EXPB908

B. City of Sacramento

Full Name (Last, First, Middle Initial)
Mailing Address 900 I St.

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement Parking

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 03 / 09 / 2016

Amount of Each Disbursement this Period: 7.50

Memo Item

Transaction ID : EXPB938

C. City of Sacramento

Full Name (Last, First, Middle Initial)
Mailing Address 900 I St.

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement Parking

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 03 / 09 / 2016

Amount of Each Disbursement this Period: 2.50

Memo Item

Transaction ID : EXPB937

SUBTOTAL of Disbursements This Page (optional)..... 361.25

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 107 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 43.75		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB909		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 22.21		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB912		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 7.35		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB913		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional)	73.31
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 108 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sacramento County Elections			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016		
Mailing Address 7000 65th St., Ste. A			Amount of Each Disbursement this Period 3600.00		
City SACRAMENTO	State CA	Zip Code 95823	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Ballot statement		Category/ Type 004			
Candidate Name		Transaction ID : EXPB853			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016		
Mailing Address 900 I St.			Amount of Each Disbursement this Period 1.75		
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Parking		Category/ Type 002			
Candidate Name		Transaction ID : EXPB939			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 8.80		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001			
Candidate Name		Transaction ID : EXPB914			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	3610.55
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 109 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 96.88	
City Sacramento	State CA	Zip Code 95818	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Merchant fee		Category/ Type 001		
Candidate Name		Transaction ID : EXPB910		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 20.00	
City SACRAMENTO	State CA	Zip Code 95814	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Parking		Category/ Type 002		
Candidate Name		Transaction ID : EXPB941		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 3.75	
City Sacramento	State CA	Zip Code 95818	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Merchant fee		Category/ Type 001		
Candidate Name		Transaction ID : EXPB915		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	120.63
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 110 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Steven Ayers		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 1545 Misty Ln.		Amount of Each Disbursement this Period 1684.89
City ROSEVILLE	State CA	
Zip Code 95747	Purpose of Disbursement FUNDRAISING EVENT	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : NONB1014
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. David Bauer		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 2150 River Plaza Dr., #150		Amount of Each Disbursement this Period 1000.50
City SACRAMENTO	State CA	
Zip Code 95833	Purpose of Disbursement Accounting svc.	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB903
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 20.00
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement Parking	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : EXPB942
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2705.39
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 111 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Edward R. Marszal Enterprises, Inc.			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 5805 Windmill Way			Amount of Each Disbursement this Period 1146.22	
City Carmichael	State CA	Zip Code 95608	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Rent		Category/ Type 001		
Candidate Name			Transaction ID : EXPB901	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 8.63	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001		
Candidate Name			Transaction ID : EXPB971	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 1.80	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001		
Candidate Name			Transaction ID : EXPB970	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	1156.65
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 112 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gilliard Blanning & Assoc., Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 5701 Lonetree Blvd. #301		Amount of Each Disbursement this Period 898.83
City ROCKLIN	State CA	
Zip Code 95765	Purpose of Disbursement Bumper stickers	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : EXPB902
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 12.00
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement Parking	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : EXPB943
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 41.63
City Sacramento	State CA	
Zip Code 95818	Purpose of Disbursement Merchant fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : EXPB972
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	952.46
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 113 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 7.00
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Merchant fee Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : EXPB969
State: District:		

Full Name (Last, First, Middle Initial) B. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 13.50
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement Parking Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : EXPB945
State: District:		

Full Name (Last, First, Middle Initial) C. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 88.25
City Sacramento State CA Zip Code 95818	Purpose of Disbursement Merchant fee Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : EXPB973
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	108.75
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 114 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 9.00
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement Parking	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB946
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 16.76
City Sacramento	State CA	
Zip Code 95818	Purpose of Disbursement Merchant fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB974
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 3.75
City Sacramento	State CA	
Zip Code 95818	Purpose of Disbursement Merchant fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB968
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	29.51
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 115 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 10.50
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement Parking	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : EXPB1043
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 88.25
City Sacramento	State CA	
Zip Code 95818	Purpose of Disbursement Merchant fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : EXPB975
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 1.80
City Sacramento	State CA	
Zip Code 95818	Purpose of Disbursement Merchant fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : EXPB967
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	100.55
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 116 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 12.00	
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Parking		002 Category/ Type		
Candidate Name		Transaction ID : EXPB1045		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 7.50	
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Parking		002 Category/ Type		
Candidate Name		Transaction ID : EXPB1044		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 8.80	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		001 Category/ Type		
Candidate Name		Transaction ID : EXPB1026		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	28.30
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 117 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 25.89	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB1025	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 10.50	
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Parking		Category/ Type 002	Transaction ID : EXPB1046	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 50.76	
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB1024	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	87.15
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 118 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 0.80	
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Parking		Category/ Type 001	Transaction ID : EXPB1047	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Vanessa Olmstead			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016	
Mailing Address 3704 Huff Way			Amount of Each Disbursement this Period 371.56	
City SACRAMENTO	State CA	Zip Code 95821	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fundraising event		Category/ Type	Transaction ID : NONB1029	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Steven Ayers			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2016	
Mailing Address 1545 Misty Ln.			Amount of Each Disbursement this Period 471.24	
City ROSEVILLE	State CA	Zip Code 95747	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FUNDRAISING EVENT		Category/ Type	Transaction ID : NONB1013	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	843.60
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 119 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2016	
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 8.63	
City Sacramento	State CA	Zip Code 95818	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB1023	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 15.00	
City SACRAMENTO	State CA	Zip Code 95814	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Parking		Category/ Type 002	Transaction ID : EXPB1048	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016	
Mailing Address 900 I St.			Amount of Each Disbursement this Period 10.50	
City SACRAMENTO	State CA	Zip Code 95814	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Parking		Category/ Type 002	Transaction ID : EXPB1049	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	34.13
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 120 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016
Mailing Address 900 I St.		Amount of Each Disbursement this Period 12.00
City SACRAMENTO	State CA	
Purpose of Disbursement Parking	Zip Code 95814	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : EXPB1050
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 1.80
City Sacramento	State CA	
Purpose of Disbursement Merchant fee	Zip Code 95818	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB1158
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. J. Edward Brooks		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2016
Mailing Address 2315 Capitol Ave.		Amount of Each Disbursement this Period 300.00
City SACRAMENTO	State CA	
Purpose of Disbursement Food for fundraiser	Zip Code 95816	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : NONB1084
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	313.80
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 121 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2016		
Mailing Address 900 I St.			Amount of Each Disbursement this Period 15.00		
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Parking		Category/ Type 002			
Candidate Name		Transaction ID : EXPB1054			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. City of Sacramento			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2016		
Mailing Address 900 I St.			Amount of Each Disbursement this Period 15.00		
City SACRAMENTO	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Parking		Category/ Type 001			
Candidate Name		Transaction ID : EXPB1051			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. eFundraising Connections			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2016		
Mailing Address 2131 Capitol Ave., #306			Amount of Each Disbursement this Period 232.75		
City Sacramento	State CA	Zip Code 95818	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001			
Candidate Name		Transaction ID : EXPB1159			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	262.75
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 122 OF 126	
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Campaign Solutions		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016
Mailing Address 117 N. St. Asaphs St.		Amount of Each Disbursement this Period 204.13 <input type="checkbox"/> Memo Item
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement Merchant fee	Transaction ID : EXPB1153
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. eFundraising Connections		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016
Mailing Address 2131 Capitol Ave., #306		Amount of Each Disbursement this Period 241.50 <input type="checkbox"/> Memo Item
City Sacramento	State CA	
Zip Code 95818	Purpose of Disbursement Merchant fee	Transaction ID : EXPB1160
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" 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		Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item
City	State	
Zip Code	Purpose of Disbursement	Transaction ID : EXPB1160
Candidate Name	Category/ Type	
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).....	445.63
TOTAL This Period (last page this line number only).....	106682.47

**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 123 OF 126			
	<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)
SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stan Lukowicz III			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016		
Mailing Address 2661 Creekside Lane			Amount of Each Disbursement this Period 1000.00		
City Sacramento	State CA	Zip Code 95821	<input type="checkbox"/> Memo Item Transaction ID : EXPB663		
Purpose of Disbursement Refund		Category/ Type 010			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" 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			Amount of Each Disbursement this Period		
City	State	Zip Code	<input type="checkbox"/> Memo Item		
Purpose of Disbursement		Category/ Type			
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			Amount of Each Disbursement this Period		
City	State	Zip Code	<input type="checkbox"/> Memo Item		
Purpose of Disbursement		Category/ Type			
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).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Capital Development Strategies, John Bovee

Mailing Address 1127 - 11th St., #310

City State Zip Code
 Sacramento CA 95814

Nature of Debt (Purpose):
 Fundraising commission

Outstanding Balance Beginning This Period	Transaction ID : PAYD390	
11271.46		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	11271.46	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Capital Development Strategies, John Bovee

Mailing Address 1127 - 11th St., #310

City State Zip Code
 Sacramento CA 95814

Nature of Debt (Purpose):
 Fundraising commission

Outstanding Balance Beginning This Period	Transaction ID : PAYD1102	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
6715.85	0.00	6715.85

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Gilliard Blanning & Assoc., Inc.

Mailing Address 5701 Lonetree Blvd. #301

City State Zip Code
 ROCKLIN CA 95765

Nature of Debt (Purpose):
 Mass mail

Outstanding Balance Beginning This Period	Transaction ID : PAYD389	
13550.85		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	13550.85	0.00

1) SUBTOTALS This Period This Page (optional)	6715.85
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

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Gilliard Blanning & Assoc., Inc.

Mailing Address 5701 Lonetree Blvd. #301

City State Zip Code
 ROCKLIN CA 95765

Nature of Debt (Purpose):
 Travel expenses

Outstanding Balance Beginning This Period **Transaction ID : PAYD1101**
 0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 1590.47 0.00 1590.47

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Scott Jones

Mailing Address 5241 Treepond Court

City State Zip Code
 Antelope CA 95843

Nature of Debt (Purpose):
 Mileage

Outstanding Balance Beginning This Period **Transaction ID : PAYD388**
 180.95

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 0.00 180.95 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Political Data Inc.

Mailing Address PO Box 1706

City State Zip Code
 Burbank CA 91507

Nature of Debt (Purpose):
 Online advertising

Outstanding Balance Beginning This Period **Transaction ID : PAYD1100**
 0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 918.10 0.00 918.10

1) SUBTOTALS This Period This Page (optional)	▶	2508.57
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

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

SHERIFF SCOTT JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Political Data Inc.

Mailing Address PO Box 1706

City State Zip Code
Burbank CA 91507

Nature of Debt (Purpose):
Voter list

Outstanding Balance Beginning This Period **Transaction ID : PAYD1211**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
307.82 0.00 307.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Serrano Country Club

Mailing Address 5005 Serrano Pkwy

City State Zip Code
EL DORADO HILLS CA 95762

Nature of Debt (Purpose):
Fundraising event

Outstanding Balance Beginning This Period **Transaction ID : PAYD1034**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
1731.95 0.00 1731.95

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

1) SUBTOTALS This Period This Page (optional)	2039.77
2) TOTALS This Period (last page this line number only)	11264.19
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) ▶	11264.19